

**ZB# 03-26**

**New Windsor Dental**

**65-2-14**

ZBA #03-26 N W DENTAL  
(SIGN) 375 WINDSOR HWY. 65-2-14

ZBA  
APPROVED  
7/14/03

APPLICATION FEE (DUE AT TIME OF FILLING OF APPLICATION)

FILE # 03-26 TYPE: AREA Sign USE \_\_\_\_\_

APPLICANT: New Windsor Dental  
375 Windsor Hwy - Suite 300  
N.W.

TELE: 565-6677

\*RESIDENTIAL: \$50.00 CHECK # \_\_\_\_\_  
\*\*COMMERCIAL: \$150.00 CHECK # \_\_\_\_\_  
\*INTERPRETATION: \$150.00 CHECK # \_\_\_\_\_

ESCROW: \$300.00 / \$500.00 CHECK # \_\_\_\_\_

**DISBURSEMENTS:**

	<b>MINUTES</b> <b>\$4.50 PER PAGE</b>	<b>ATTORNEY FEES</b> <b>\$35.00 / MEETING</b>
PRELIM..... <u>6/9/03</u> .....	\$ <u>22.50</u>	\$ <u>35.00</u>
2 <sup>ND</sup> PRELIM.....	_____	_____
3 <sup>RD</sup> PRELIM.....	_____	_____
PUB HEARING... <u>7/14/03</u> ...	_____	<u>35.00</u>
PUB HEARING (CON'T)...	_____	_____
TOTAL	\$ <u><u>22.50</u></u>	\$ <u><u>70.00</u></u>

OTHER CHARGES:..... \$ \_\_\_\_\_

• • • • •

ESCROW POSTED: \$ 500.00  
AMOUNT DUE: \$ \_\_\_\_\_  
REFUND DUE: \$ 407.50

8/11/03  
L.R.

NEW WINDSOR ZONING BOARD OF APPEALS

SBL: 65-2-14

In the Matter of the Application of

MEMORANDUM OF  
DECISION GRANTING

NEW WINDSOR DENTAL MANAGEMENT

AREA

CASE #03-26

**WHEREAS**, **New Windsor Dental Management**, owner(s) of 375 Windsor Highway, New Windsor, New York, 12553, has made application before the Zoning Board of Appeals for a/an 6 inch height variance for eight (8) signs and a 5 foot width variance for one of the eight signs;

**WHEREAS**, a public hearing was held on July 14, 2003 before the Zoning Board of Appeals at the Town Hall, New Windsor, New York; and

**WHEREAS**, the Mr. Tom Walsh of Sign Language appeared on behalf of this Application; and

**WHEREAS**, there were no spectators appearing at the public hearing; and

**WHEREAS**, no one spoke in favor of or in opposition to the Application; and

**WHEREAS**, a decision was made by the Zoning Board of Appeals on the date of the public hearing granting the application; and

**WHEREAS**, the Zoning Board of Appeals of the Town of New Windsor sets forth the following findings in this matter here memorialized in furtherance of its previously made decision in this matter:

1. The notice of public hearing was duly sent to residents and businesses as prescribed by law and published in The Sentinel, also as required by law.
2. The Evidence presented by the Applicant showed that:
  - (a) The property is a commercial property located in a neighborhood of commercial properties on a busy state highway.
  - (b) The property is "Strip" shopping center containing a number of units.
  - (c) The applicant seeks to place signs on the building for its eight (8) applicants. For seven (7) of the signs, they are requesting a 6 inch height variance and for one (1) sign, a 6 inch height and a five foot width variance.

- (d) The property is removed from the roadway
- (e) The signs will not be flashing and will be illuminated by neon internally only.
- (f) The signs are intended to replace existing signs, which replacement was made necessary by improving the appearance of the building.

**WHEREAS,** The Zoning Board of Appeals of the Town of New Windsor makes the following conclusions of law here memorialized in furtherance of its previously made decision in this matter:

1. The requested variance(s) will not produce an undesirable change in the character of the neighborhood or create a detriment to nearby properties.
2. There is no other feasible method available to the Applicant that can produce the benefits sought.
3. The variance(s) requested are substantial in relation to the Town regulations but, nevertheless, are warranted.
4. The requested variance(s) will not have an adverse effect or impact on the physical or environmental conditions in the neighborhood or zoning district.
5. The difficulty the Applicant faces in conforming to the bulk regulations is self-created but, nevertheless, should be allowed.
6. The benefit to the Applicant, if the requested variance(s) are granted, outweighs the detriment to the health, safety and welfare of the neighborhood or community.
7. The requested variance(s) are/is appropriate and are/is the minimum variance(s) necessary and adequate to allow the Applicant relief from the requirements of the Zoning Local Law and at the same time preserve and protect the character of the neighborhood and the health, safety and welfare of the community.
8. The interests of justice will be served by allowing the granting of the requested area variance(s).

**NOW, THEREFORE, BE IT**

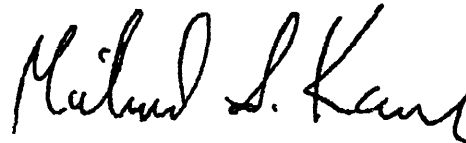
**RESOLVED,** that the Zoning Board of Appeals of the Town of New Windsor GRANT a request for a 6 inch height variance for eight (8) signs and a 5 foot width variance for one of the eight signs;

as sought by the Applicant in accordance with plans filed with the Building Inspector and presented at the public hearing.

**BE IT FURTHER**

**RESOLVED**, that the Secretary of the Zoning Board of Appeals of the Town of New Windsor transmit a copy of this decision to the Town Clerk, Town Planning Board and/or Building Inspector and Applicant.

Dated: November 3, 2003

A handwritten signature in black ink, reading "Michael S. Kung". The signature is written in a cursive style with a large, stylized "M" and "K".

---

Chairman



# Town of New Windsor

555 Union Avenue  
New Windsor, New York 12553  
Telephone: (845) 563-4615  
Fax: (845) 563-4695

## OFFICE OF THE ZONING BOARD OF APPEALS

November 12, 2003

New Windsor Dental Management  
375 Windsor Highway  
New Windsor, NY 12553

SUBJECT: REQUEST FOR VARIANCE #03-26

Dear Sir:

Please find enclosed two copies of the Formal Decision for your case before the Zoning Board of Appeals. Please keep these copies in your records for future reference if needed.

If you are in need of any further assistance or have any questions in this matter, please feel free to contact me at the above number.

Very truly yours,

---

Myra Mason, Secretary to the  
NEW WINDSOR ZONING BOARD

MLM:mlm

cc: Michael Babcock, Building Inspector

**OFFICE OF THE BUILDING INSPECTOR  
TOWN OF NEW WINDSOR  
ORANGE COUNTY, NEW YORK**

**NOTICE OF DISAPPROVAL OF BUILDING PERMIT APPLICATION**

**APPLICANT IS TO PLEASE CONTACT THE ZONING BOARD SECRETARY AT (845) 563-4615 TO  
MAKE AN APPOINTMENT WITH THE ZONING BOARD OF APPEALS.**

DATE: 4/29/03

APPLICANT: New Windsor Dental Management Corp.  
375 Windsor Highway, Suite 300  
New Windsor, NY 12553

**COPY**

PLEASE TAKE NOTICE THAT YOUR APPLICATION DATE: 4/28/03

FOR : (7)—3x10 Façade signs

LOCATED AT: 375 Windsor Highway

ZONE: C Sec/ Blk/ Lot: 65-2-14

DESCRIPTION OF EXISTING SITE:

IS DISAPPROVED ON THE FOLLOWING GROUNDS:

1. 48-18, H-1b One 2.5ftx10ft Façade sign for each permitted business allowed. Proposed signs are 3ftx10ft. A variance of .5ft is required for each of the (7) façade signs.

  
BUILDING INSPECTOR



PERMITTED

PROPOSED OR  
AVAILABLE:

VARIANCE  
REQUEST:

ZONE: C      USE:

SIGN:

FREESTANDING:

HEIGHT:

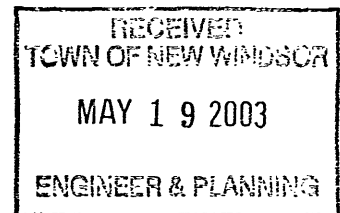
WIDTH:

WALL SIGNS: (7)—2.5ftx10ft signs      (7)—3ftx10ft signs      (7)signs--.5ft height each

TOTAL ALL SIGNS:

FEET FROM ANY LOT LINE:

cc: Z.B.A., APPLICANT, FILE, W/ATTACHED MAP



**APPROVED**

**03-26**

**OFFICE OF THE BUILDING INSPECTOR  
TOWN OF NEW WINDSOR  
ORANGE COUNTY, NEW YORK**

**NOTICE OF DISAPPROVAL OF BUILDING PERMIT APPLICATION**

**APPLICANT IS TO PLEASE CONTACT THE ZONING BOARD SECRETARY AT (845) 563-4615 TO  
MAKE AN APPOINTMENT WITH THE ZONING BOARD OF APPEALS.**

**DATE: June 2, 2003**

**APPLICANT: New Windsor Dental  
375 Windsor Highway  
New Windsor, NY 12553**

**PLEASE TAKE NOTICE THAT YOUR APPLICATION DATE: 6/2/03**

**FOR : Radiance Tanning Studio**

**LOCATED AT: 375 Windsor Highway**

**ZONE: C      Sec/ Blk/ Lot: 65-2-14**

**COPY**

**DESCRIPTION OF EXISTING SITE: Existing mini- mall**

**IS DISAPPROVED ON THE FOLLOWING GROUNDS:**

- 1. Proposed wall sign will exceed maximum size of 2'6"x10'.**

  
**BUILDING INSPECTOR**

**VARIANCE  
REQUEST:**

cc: Z.B.A., APPLICANT, FILE,W/ATTACHED MAP

PLEASE ALLOW FIVE TO TEN DAYS TO PROCESS  
IMPORTANT  
YOU MUST CALL FOR ALL REQUIRED INSPECTIONS OF CONSTRUCTION

Other inspections will be made in most cases but those listed below must be made or Certificate of Occupancy may be withheld. Do not mistake an unscheduled inspection for one of those listed below. Unless an inspection report is left on the job indicating approval of one of these inspections it has not been approved and it is improper to continue beyond that point in the work. Any disapproved work must be reinspected and corrected.

RECEIVED

MAY 29 2003

BUILDING DEPARTMENT

1. When excavating is complete and footing forms are in place (before pouring.)
2. Foundation inspection. Check here for waterproofing and footing drains.
3. Inspect gravel base under concrete floors and under slab plumbing.
4. When framing, rough plumbing, rough electric and before being covered.
5. Insulation.
6. Final inspection for Certificate of Occupancy. Have on hand electrical inspection data and final certified plot plan. Building is to be completed at this time. Well water test required and engineer's certification letter for septic system required.
7. Driveway inspection must meet approval of Town Highway Superintendent. A driveway bond may be required.
8. \$50.00 charge for any site that calls for the inspection twice.
9. Call 24 hours in advance, with permit number, to schedule inspection.
10. There will be no inspections unless yellow permit card is posted.
11. Sewer permits must be obtained along with building permits for new houses.
12. Septic permit must be submitted with engineer's drawing and perc test.
13. Road opening permits must be obtained from Town Clerk's office.
14. All building permits will need a Certificate of Occupancy or a Certificate of Compliance and here is no fee for this.

FOR OFFICE USE ONLY:  
Building Permit #: PA 2003-0591

**AFFIDAVIT OF OWNERSHIP AND/OR CONTRACTOR'S COMP & LIABILITY INSURANCE CERTIFICATE IS  
REQUIRED BEFORE THE BUILDING PERMIT APPLICATION WILL BE ACCEPTED AND/OR ISSUED**

PLEASE PRINT CLEARLY - FILL OUT ALL INFORMATION WHICH APPLIES TO YOU

Owner of Premises NEW WINDSOR DENTAL MANAGEMENT CORP.

Address 375 WINDSOR HIGHWAY, SUITE #300 NEW WINDSOR, NY Phone # 845-565-6677

Mailing Address SAME Fax # 845-565-6163

Name of Architect NONE

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name of Contractor SIGN LANGUAGE INC.

Address 182 OLD ATG, FISHKILL, NY 12524 Phone 845-896-2156

State whether applicant is owner, lessee, agent, architect, engineer or builder OWNER LESSEE

If applicant is a corporation, signature of duly authorized officer. Jerome J. Minerva  
(Name and title of corporate officer)

1. On what street is property located? On the \_\_\_\_\_ side of \_\_\_\_\_  
(N, S, E or W)  
and \_\_\_\_\_ feet from the intersection of \_\_\_\_\_
2. Zone or use district in which premises are situated \_\_\_\_\_ Is property a flood zone? Y \_\_\_\_\_ N ☒
3. Tax Map Description: Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_
4. State existing use and occupancy of premises and intended use and occupancy of proposed construction.  
a. Existing use and occupancy COMMERCIAL b. Intended use and occupancy \_\_\_\_\_
5. Nature of work (check if applicable) ☐ New Bldg. ☐ Addition ☐ Alteration ☐ Repair ☐ Removal ☐ Demolition ☒ Other SIGN
6. Is this a corner lot? \_\_\_\_\_
7. Dimensions of entire new construction. Front \_\_\_\_\_ Rear \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_ No. of stories \_\_\_\_\_  
15' W x 3' HIGH
8. If dwelling, number of dwelling units: \_\_\_\_\_ Number of dwelling units on each floor \_\_\_\_\_  
Number of bedrooms \_\_\_\_\_ Baths \_\_\_\_\_ Toilets \_\_\_\_\_ Heating Plant: Gas \_\_\_\_\_ Oil \_\_\_\_\_  
Electric/Hot Air \_\_\_\_\_ Hot Water \_\_\_\_\_ If Garage, number of cars \_\_\_\_\_
9. If business, commercial or mixed occupancy, specify nature and extent of each type of use \_\_\_\_\_  
\_\_\_\_\_
10. Estimated cost 6,500 Fee \$0 cash

**ZONING BOARD**

\_\_\_\_\_  
date

APPLICATION FOR BUILDING PERMIT  
TOWN OF NEW WINDSOR, ORANGE COUNTY, NEW YORK  
Pursuant to New York State Building Code and Town Ordinances

Building Inspector: Michael L. Babcock  
Asst. Inspectors: Frank Liel & Louis Kryshear  
New Windsor Town Hall  
555 Union Avenue  
New Windsor, New York 12553  
(845) 563-4818  
(845) 563-4895 FAX

Bldg Insp Examined \_\_\_\_\_  
Fire Insp Examined \_\_\_\_\_  
Approved \_\_\_\_\_  
Disapproved \_\_\_\_\_  
Permit No. \_\_\_\_\_

INSTRUCTIONS

- A. This application must be completely filled in by typewriter or in ink and submitted to the Building Inspector.
- B. Plot plan showing location of lot and buildings on premises, relationship to adjoining premises or public streets or areas, and giving a detailed description of layout of property must be drawn on the diagram, which is part of this application.
- C. This application must be accompanied by two complete sets of plans showing proposed construction and two complete sets of specifications. Plans and specifications shall describe the nature of the work to be performed, the materials and equipment to be used and installed and details of structural, mechanical and plumbing installations.
- D. The work covered by this application may not be commenced before the issuance of a Building Permit.
- E. Upon approval of this application, the Building Inspector will issue a Building Permit to the applicant together with approved set of plans and specifications. Such permit and approved plans and specifications shall be kept on the premises, available for inspection throughout the progress of the work.
- F. No building shall be occupied or used in whole or in part for any purpose whatever until a Certificate of Occupancy shall have been granted by the Building Inspector.

APPLICATION IS HEREBY MADE to the Building Inspector for the issuance of a Building Permit pursuant to the New York Building Construction Code Ordinances of the Town of New Windsor for the construction of buildings, additions, or alterations, or for removal or demolition or use of property as herein described. The applicant agrees to comply with all applicable laws, ordinances, regulations and certifies that he is the owner or agent of all that certain lot, piece or parcel of land and/or building described in this application and if not the owner, that he has been duly and properly authorized to make this application and to assume responsibility for the owner in connection with this application.

Vincent J. Minicella  
(Signature of Applicant)

375 Windsor Highway New Windsor NY 12553  
(Address of Applicant)

[Signature]  
(Owner's Signature)

375 WINDSOR Hgway NEW WINDSOR NY



INTERIOR ILLUMINATED CABINET WITH  
ANODIZED GOLD FACE WITH .5" PUSH THRU ACRYLIC FACE  
WITH BLACK VINYL GRAPHIC

RADIANCE NEON CHANNEL LETTERS  
WITH WHITE RETURNS AND GOLD JEWELLITE

PURPLE BACKGROUND RACEWAY .080 ALUM



NEW YORK  
*Radiance*  
THE ULTIMATE TANNING STUDIO

3'

15'

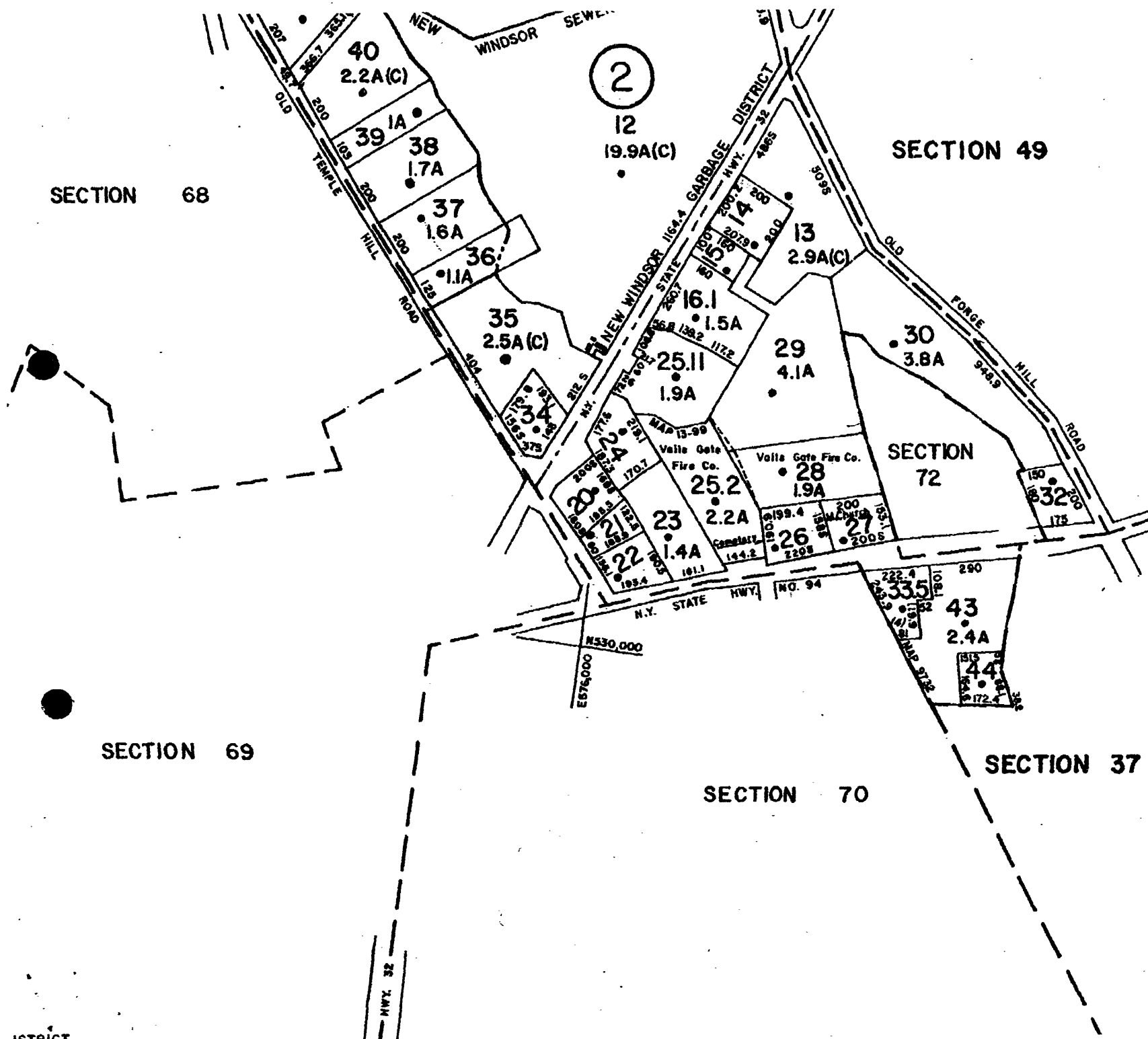
INTERIOR ILLUMINATED CABINET BLACK FABRICATED FROM .080 ALUM.  
WITH .5" PUSH THRU ACRYLIC LETTER WITH  
OPAQUE GOLD VINYL OVERLAY LETTERS WILL HALO LIGHT



Designed Exclusively for: RADIANCE TANNING STUDIO	Date: 5/27/03
Address:	Phone:
<p>The Prices, Specifications, and Conditions as Described are Satisfactory and are Hereby Accepted. You Are Authorized to do the Work as Specified. Signature _____</p> <p><b>50% DEPOSIT REQUIRED ON ALL WORK. BALANCE DUE ON COMPLETION</b></p>	

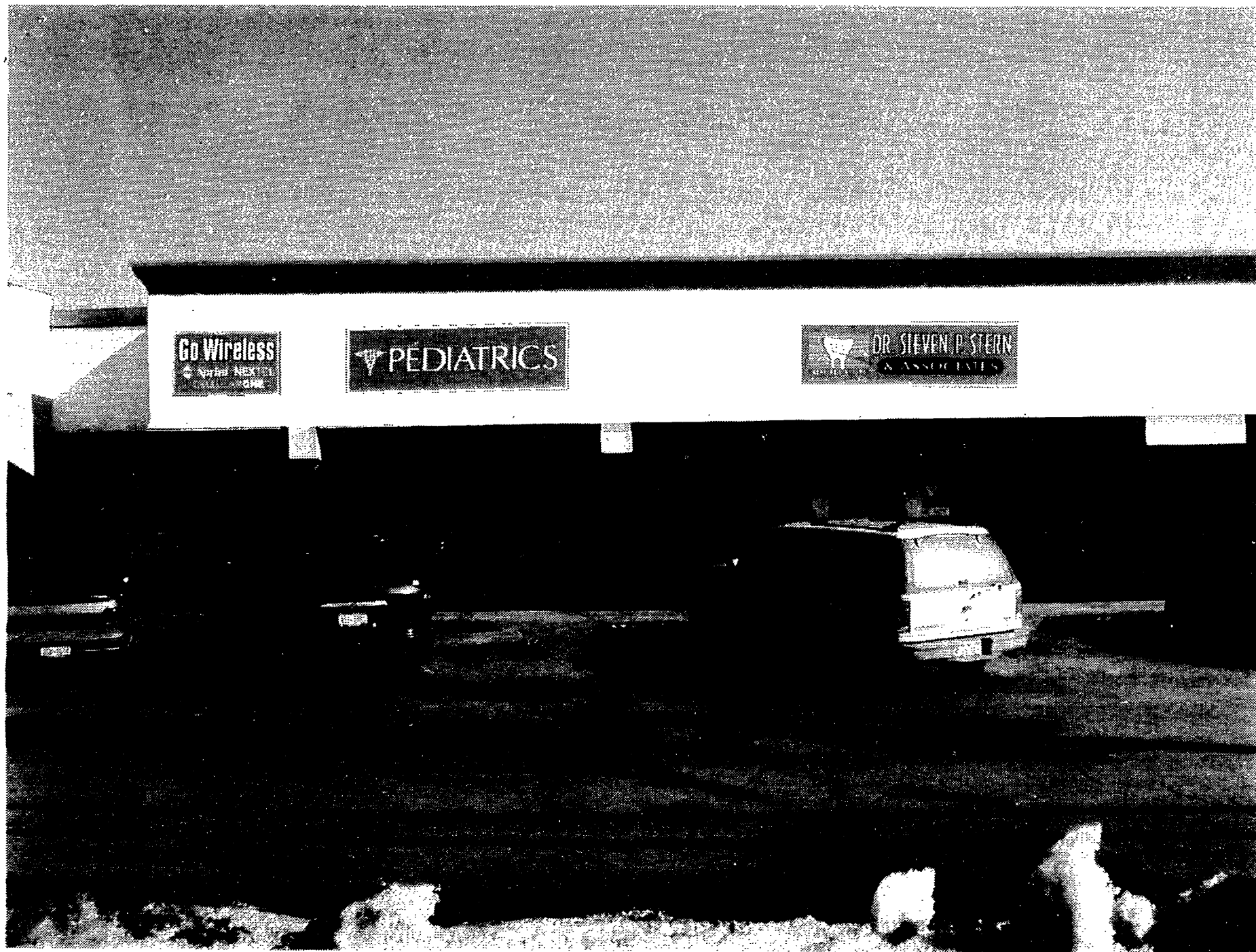
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PLEASE ALLOW FIVE TO TEN DAYS TO PROCESS  
**IMPORTANT**  
YOU MUST CALL FOR ALL REQUIRED INSPECTIONS OF CONSTRUCTION

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1. When excavating is complete and footing forms are in place (before pouring.)
2. Foundation inspection. Check here for waterproofing and footing drains.
3. Inspect gravel base under concrete floors and under slab plumbing.
4. When framing, rough plumbing, rough electric and before being covered.
5. Insulation.
6. Final inspection for Certificate of Occupancy. Have on hand electrical inspection data and final certified plot plan. Building is to be completed at this time. Well water test required and engineer's certification letter for septic system required.
7. Driveway inspection must meet approval of Town Highway Superintendent. A driveway pond may be required.
8. \$50.00 charge for any site that calls for the inspection twice.
9. Call 24 hours in advance, with permit number, to schedule inspection.
10. There will be no inspections unless yellow permit card is posted.
11. Sewer permits must be obtained along with building permits for new houses.
12. Septic permit must be submitted with engineer's drawing and percolation test.
13. Road opening permits must be obtained from Town Clerk's office.
14. All building permits will need a Certificate of Occupancy or a Certificate of Compliance and here is no fee for this.

FOR OFFICE USE ONLY:  
Building Permit #: PA 2003-0391

**AFFIDAVIT OF OWNERSHIP AND/OR CONTRACTOR'S COMP. & LIABILITY INSURANCE CERTIFICATE IS REQUIRED BEFORE THE BUILDING PERMIT APPLICATION WILL BE ACCEPTED AND/OR ISSUED**

PLEASE PRINT CLEARLY - FILL OUT ALL INFORMATION WHICH APPLIES TO YOU

Owner of Premises NEW WINDSOR DENTAL MANAGEMENT CORP.

Address 375 WINDSOR HIGHWAY Phone # 565-6677

Mailing Address \_\_\_\_\_ Fax # \_\_\_\_\_

Name of Architect \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name of Contractor SIGN LANGUAGE INC

Address 182 OLD RT 9 FISHKILL Phone 896-2156

State whether applicant is owner, lessee, agent, architect, engineer or builder BUILDER

If applicant is a corporation, signature of duly authorized officer. Thomas A. W. [Signature] SLON/LANGUAGE INC.  
(Name and title of corporate officer)

1. On what street is property located? On the \_\_\_\_\_ side of \_\_\_\_\_  
(N, S, E or W)  
and \_\_\_\_\_ feet from the intersection of \_\_\_\_\_

2. Zone or use district in which premises are situated \_\_\_\_\_ is property a flood zone? Y \_\_\_\_\_ N \_\_\_\_\_

3. Tax Map Description: Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

4. State existing use and occupancy of premises and intended use and occupancy of proposed construction.

a. Existing use and occupancy \_\_\_\_\_ b. Intended use and occupancy \_\_\_\_\_

5. Nature of work (check if applicable) ☐ New Bldg. ☐ Addition ☐ Alteration ☐ Repair ☐ Removal ☐ Demolition ☐ Other SLON

6. Is this a corner lot? \_\_\_\_\_ 3' x 10'

7. Dimensions of entire new construction. Front \_\_\_\_\_ Rear \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_ No. of stories \_\_\_\_\_

8. If dwelling, number of dwelling units: \_\_\_\_\_ Number of dwelling units on each floor \_\_\_\_\_

Number of bedrooms \_\_\_\_\_ Baths \_\_\_\_\_ Toilets \_\_\_\_\_ Heating Plant: Gas \_\_\_\_\_ Oil \_\_\_\_\_  
Electric/Hot Air \_\_\_\_\_ Hot Water \_\_\_\_\_ If Garage, number of cars \_\_\_\_\_

9. If business, commercial or mixed occupancy, specify nature and extent of each type of use \_\_\_\_\_

10. Estimated cost \_\_\_\_\_

Fee Part of Ch# 3219

**PAID**

\_\_\_\_/\_\_\_\_/\_\_\_\_  
date

APPLICATION FOR BUILDING PERMIT  
TOWN OF NEW WINDSOR, ORANGE COUNTY, NEW YORK  
Pursuant to New York State Building Code and Town Ordinances

Building Inspector: Michael L. Babcock  
Asst. Inspectors: Frank Lial & Louis Kryshnar  
New Windsor Town Hall  
555 Union Avenue  
New Windsor, New York 12553  
(845) 563-4618  
(845) 563-4695 FAX

Bldg Insp Examined \_\_\_\_\_  
Fire Insp Examined \_\_\_\_\_  
Approved \_\_\_\_\_  
Disapproved \_\_\_\_\_  
Permit No. \_\_\_\_\_

INSTRUCTIONS

- A. This application must be completely filled in by typewriter or in ink and submitted to the Building Inspector.
- B. Plot plan showing location of lot and buildings on premises, relationship to adjoining premises or public streets or areas, and giving a detailed description of layout of property must be drawn on the diagram, which is part of this application.
- C. This application must be accompanied by two complete sets of plans showing proposed construction and two complete sets of specifications. Plans and specifications shall describe the nature of the work to be performed, the materials and equipment to be used and installed and details of structural, mechanical and plumbing installations.
- D. The work covered by this application may not be commenced before the issuance of a Building Permit.
- E. Upon approval of this application, the Building Inspector will issue a Building Permit to the applicant together with approved set of plans and specifications. Such permit and approved plans and specifications shall be kept on the premises, available for inspection throughout the progress of the work.
- F. No building shall be occupied or used in whole or in part for any purpose whatever until a Certificate of Occupancy shall have been granted by the Building Inspector.

APPLICATION IS HEREBY MADE to the Building Inspector for the issuance of a Building Permit pursuant to the New York Building Construction Code Ordinances of the Town of New Windsor for the construction of buildings, additions, or alterations, or for removal or demolition or use of property as herein described. The applicant agrees to comply with all applicable laws, ordinances, regulations and certifies that he is the owner or agent of all that certain lot, piece or parcel of land and/or building described in this application and if not the owner, that he has been duly and properly authorized to make this application and to assume responsibility for the owner in connection with this application.

Thomas A. White  
(Signature of Applicant)

PROS. INC 182 OLD RD FISHKILL NY 12524

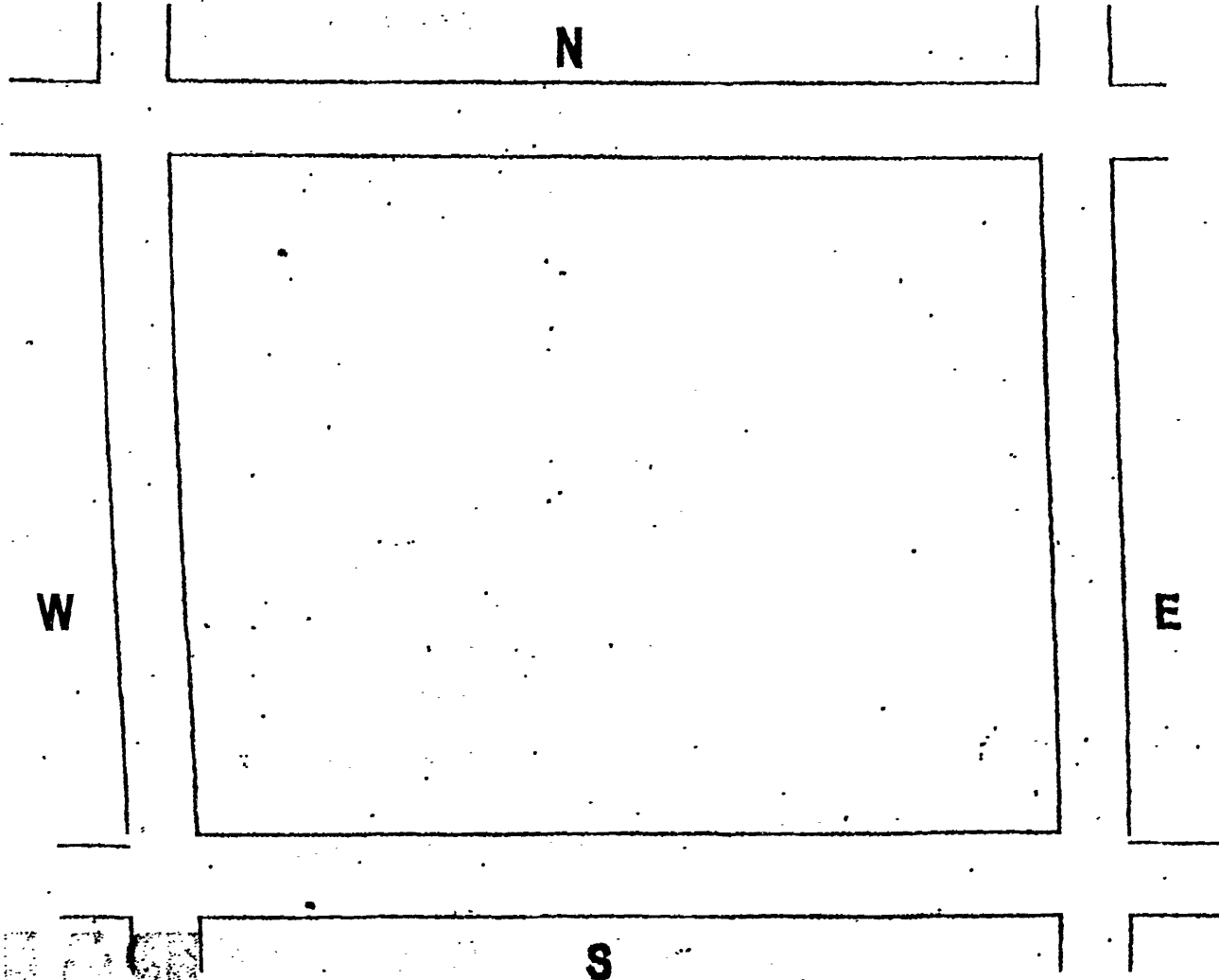
(Address of Applicant)

[Signature]  
(Owner's Signature)

375 WINDSOR Highway

# PLOT PLAN

**NOTE:** Locate all buildings and indicate all set back dimensions. Applicant must indicate the building line or lines clearly and distinctly on the drawings.





3' X 10' SINGLE SIDED ELECTRIC SIGN  
LIGHT GREY SIGN BODY RED TRANSLUCENT BACKGROUND  
YELLOW LOGO AND STRIPE AND WHITE COPY



Designed Exclusively for:	Date: 4/23/03
Address:	Phone:
The Prices, Specifications, and Conditions as Described are Satisfactory and are Hereby Accepted. You Are Authorized to do the Work as Specified. Signature _____	
50% DEPOSIT REQUIRED ON ALL WORK. BALANCE DUE ON COMPLETION	

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**ACORD CERTIFICATE OF LIABILITY INSURANCE**DATE (MM/DD/YYYY)  
04/25/2003

PRODUCER

ABRAMS & STELEFSON  
INSURANCE AGENCY LLC  
98 GRAND ST  
NEWBURGH, NY 12550

845-565-7894

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND OFFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED

SIGN LANGUAGE INC.  
182 OLD ROUTE 9  
FISHKILL, NY 12524

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: NAUTICUS INSURANCE COMPANY

INSURER B: PROGRESSIVE INSURANCE COMPANY

INSURER C: PRINCETON INSURANCE COMPANY

INSURER D:

INSURER E:

**COVERAGES**

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

COVER	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIMITS
A	GENERAL LIABILITY	02957859	05/20/02	05/20/03	EACH OCCURRENCE \$ 1MILLION
	COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 5,000
					PERSONAL & ADV INJURY \$ 1MILLION
	GENL AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE \$ 2MILLION
	POLICY <input type="checkbox"/> PRO <input type="checkbox"/> JEOT <input type="checkbox"/> LOC <input type="checkbox"/>				PRODUCTS & COM/OP AGG \$ 2MILLION
B	AUTOMOBILE LIABILITY	CA017011460	05/20/02	05/20/03	COMBINED SINGLE LIMIT (Ea accident) \$ 300,000
	ANY AUTO				BODILY INJURY (Per person) \$
	ALLOWED AUTOS				BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	HIRE AUTOS				
	NON-OWNED AUTOS				
	CARAGE LIABILITY				AUTO ONLY: EA ACCIDENT \$
	ANY AUTO				OTHER THAN AUTO ONLY: EA ACC \$
	EXCESS/UMBRELLA LIABILITY				AUTO ONLY: AGG \$
	CCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/>				EACH OCCURRENCE \$
	DEDUCTIBLE				AGGREGATE \$
	RETENTION \$				
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC31019155	05/20/02	05/20/03	<input checked="" type="checkbox"/> WC STATUS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/ MEMBER EXCLUDED?				E.L. EACH ACCIDENT \$ 100,000
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE: EA EMPLOYEE \$ 500,000
	OTHER				E.L. DISEASE: POLICY LIMIT \$ 100,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

SIGN INSTALLATION

LOCATION OF WORK: NEW WINDSOR DENTAL BUILDING

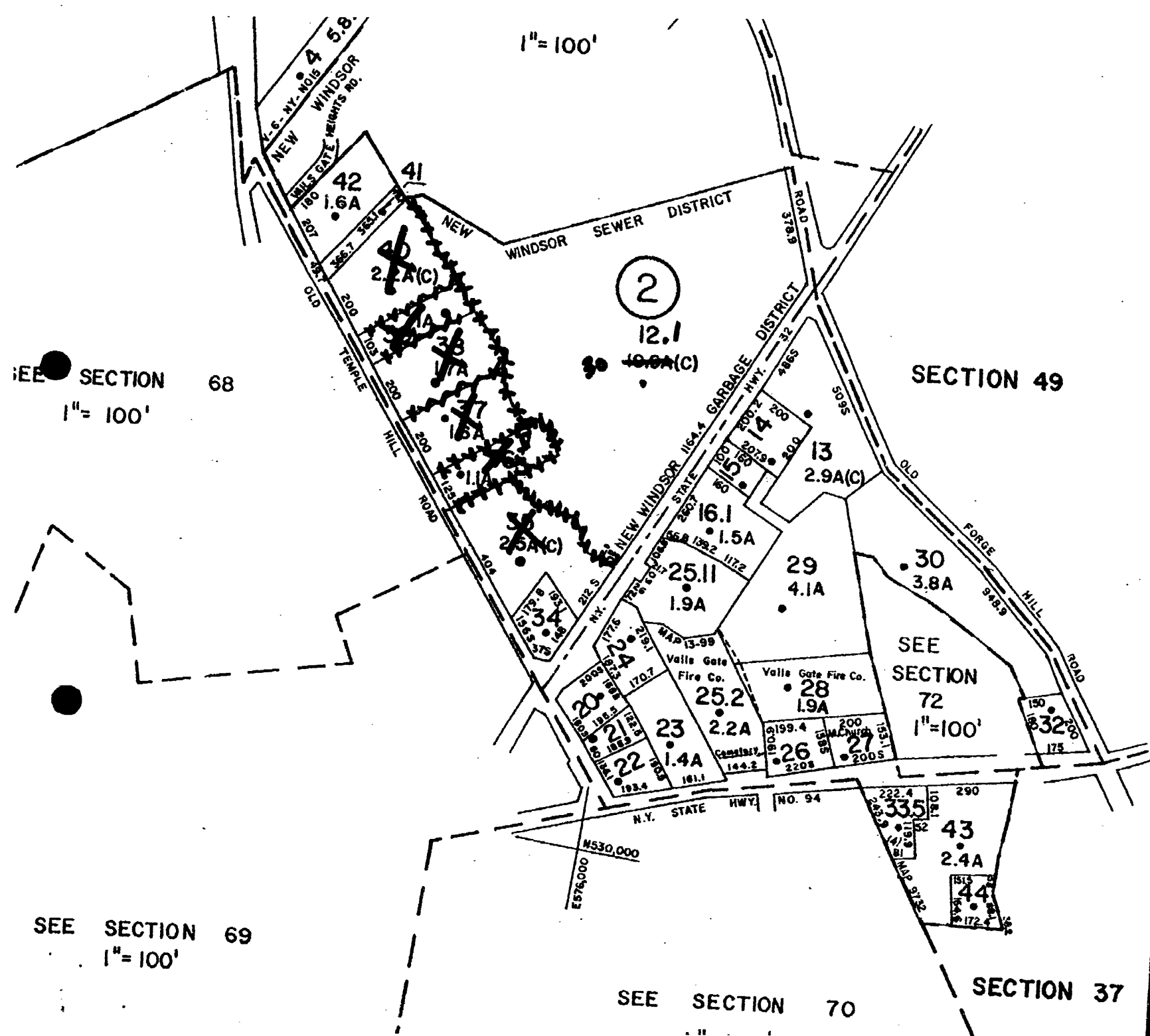
**CERTIFICATE HOLDER**

TOWN OF NEW WINDSOR  
555 UNION AVE.  
NEW WINDSOR, NY 12553

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THE REASON THEREOF THE ISSUING INSURER WILL ENDEAVOR TO MAIL 15 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



PLEASE ALLOW FIVE TO TEN DAYS TO PROCESS  
**IMPORTANT**  
J MUST CALL FOR ALL REQUIRED INSPECTIONS OF CONSTRUCTION

Other inspections will be made in most cases but those listed below must be made or Certificate of Occupancy may be withheld. Do not mistake an unscheduled inspection for one of those listed below. Unless an inspection report is left on the job indicating approval of one of these inspections it has not been approved and it is improper to continue beyond that point in the work. Any disapproved work must be reinspected after correction.

1. When excavating is complete and footing forms are in place (before pouring.)
2. Foundation inspection. Check here for waterproofing and footing drains.
3. Inspect gravel base under concrete floors and under slab plumbing.
4. When framing, rough plumbing, rough electric and before being covered.
5. Insulation.
6. Final inspection for Certificate of Occupancy. Have on hand electrical inspection data and final certified plot plan. Building is to be completed at this time. Well water test required and engineer's certification letter for septic system required.
7. Driveway inspection must meet approval of Town Highway Superintendent. A driveway pond may be required.
8. \$50.00 charge for any site that calls for the inspection twice.
9. Call 24 hours in advance, with permit number, to schedule inspection.
10. There will be no inspections unless yellow permit card is posted.
11. Sewer permits must be obtained along with building permits for new houses.
12. Septic permit must be submitted with engineer's drawing and percolation test.
13. Road opening permits must be obtained from Town Clerk's office.
14. All building permits will need a Certificate of Occupancy or a Certificate of Compliance and there is no fee for this.

FOR OFFICE USE ONLY:  
Building Permit #: PA 2003-0389

**AFFIDAVIT OF OWNERSHIP AND/OR CONTRACTOR'S COMP & LIABILITY INSURANCE CERTIFICATE IS REQUIRED BEFORE THE BUILDING PERMIT APPLICATION WILL BE ACCEPTED AND/OR ISSUED**

PLEASE PRINT CLEARLY - FILL OUT ALL INFORMATION WHICH APPLIES TO YOU

Owner of Premises NEW WINDSOR DENTAL MANAGEMENT CORP

Address 375 WINDSOR HIGHWAY Phone # 565-6677

Mailing Address \_\_\_\_\_ Fax # \_\_\_\_\_

Name of Architect \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name of Contractor SIGN LANGUAGE INC

Address 182 OLD PT 9 FISHKILL NY Phone 896-2156

State whether applicant is owner, lessee, agent, architect, engineer or builder BUILDER

If applicant is a corporation, signature of duly authorized officer. Thomas R. W. PRES SGN LANGUAGE INC.  
(Name and title of corporate officer)

1. On what street is property located? On the \_\_\_\_\_ side of \_\_\_\_\_  
(N, S, E or W)  
and \_\_\_\_\_ feet from the intersection of \_\_\_\_\_

2. Zone or use district in which premises are situated \_\_\_\_\_ Is property a flood zone? Y \_\_\_\_\_ N \_\_\_\_\_

3. Tax Map Description: Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

4. State existing use and occupancy of premises and intended use and occupancy of proposed construction.

a. Existing use and occupancy \_\_\_\_\_ b. Intended use and occupancy \_\_\_\_\_

5. Nature of work (check if applicable) ☐ New Bldg. ☐ Addition ☐ Alteration ☐ Repair ☐ Removal ☐ Demolition ☒ Other SGN

6. Is this a corner lot? \_\_\_\_\_ 3'x10'

7. Dimensions of entire new construction. Front \_\_\_\_\_ Rear \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_ No. of stories \_\_\_\_\_

8. If dwelling, number of dwelling units: \_\_\_\_\_ Number of dwelling units on each floor \_\_\_\_\_

Number of bedrooms \_\_\_\_\_ Baths \_\_\_\_\_ Toilets \_\_\_\_\_ Heating Plant: Gas \_\_\_\_\_ Oil \_\_\_\_\_  
Electric/Hot Air \_\_\_\_\_ Hot Water \_\_\_\_\_ If Garage, number of cars \_\_\_\_\_

9. If business, commercial or mixed occupancy, specify nature and extent of each type of use \_\_\_\_\_

10. Estimated cost \_\_\_\_\_ Fee \$50 part of ch#

3219

**PAID**

\_\_\_\_\_  
date

**APPLICATION FOR BUILDING PERMIT**  
**TOWN OF NEW WINDSOR, ORANGE COUNTY, NEW YORK**  
Pursuant to New York State Building Code and Town Ordinances

Building Inspector: Michael L. Babcock  
Asst. Inspectors: Frank Liel & Louis Krysheer  
New Windsor Town Hall  
555 Union Avenue  
New Windsor, New York 12553  
(845) 563-4818  
(845) 563-4895 FAX

Big Insp Examined \_\_\_\_\_  
Fire Insp Examined \_\_\_\_\_  
Approved \_\_\_\_\_  
Disapproved \_\_\_\_\_  
Permit No. \_\_\_\_\_

**INSTRUCTIONS**

- A. This application must be completely filled in by typewriter or in ink and submitted to the Building Inspector.
- B. Plot plan showing location of lot and buildings on premises, relationship to adjoining premises or public streets or areas, and giving a detailed description of layout of property must be drawn on the diagram, which is part of this application.
- C. This application must be accompanied by two complete sets of plans showing proposed construction and two complete sets of specifications. Plans and specifications shall describe the nature of the work to be performed, the materials and equipment to be used and installed and details of structural, mechanical and plumbing installations.
- D. The work covered by this application may not be commenced before the issuance of a Building Permit.
- E. Upon approval of this application, the Building Inspector will issue a Building Permit to the applicant together with approved set of plans and specifications. Such permit and approved plans and specifications shall be kept on the premises, available for inspection throughout the progress of the work.
- F. No building shall be occupied or used in whole or in part for any purpose whatever until a Certificate of Occupancy shall have been granted by the Building Inspector.

APPLICATION IS HEREBY MADE to the Building Inspector for the issuance of a Building Permit pursuant to the New York Building Construction Code Ordinances of the Town of New Windsor for the construction of buildings, additions, or alterations, or for removal or demolition or use of property as herein described. The applicant agrees to comply with all applicable laws, ordinances, regulations and certifies that he is the owner or agent of all that certain lot, piece or parcel of land and/or building described in this application and if not the owner, that he has been duly and properly authorized to make this application and to assume responsibility for the owner in connection with this application.

Thomas A. Walsh  
(Signature of Applicant)

SHAW  
INC.

182 OLD RT 9, FISHKILL NY 12524

(Address of Applicant)

X [Signature]  
(Owner's Signature)

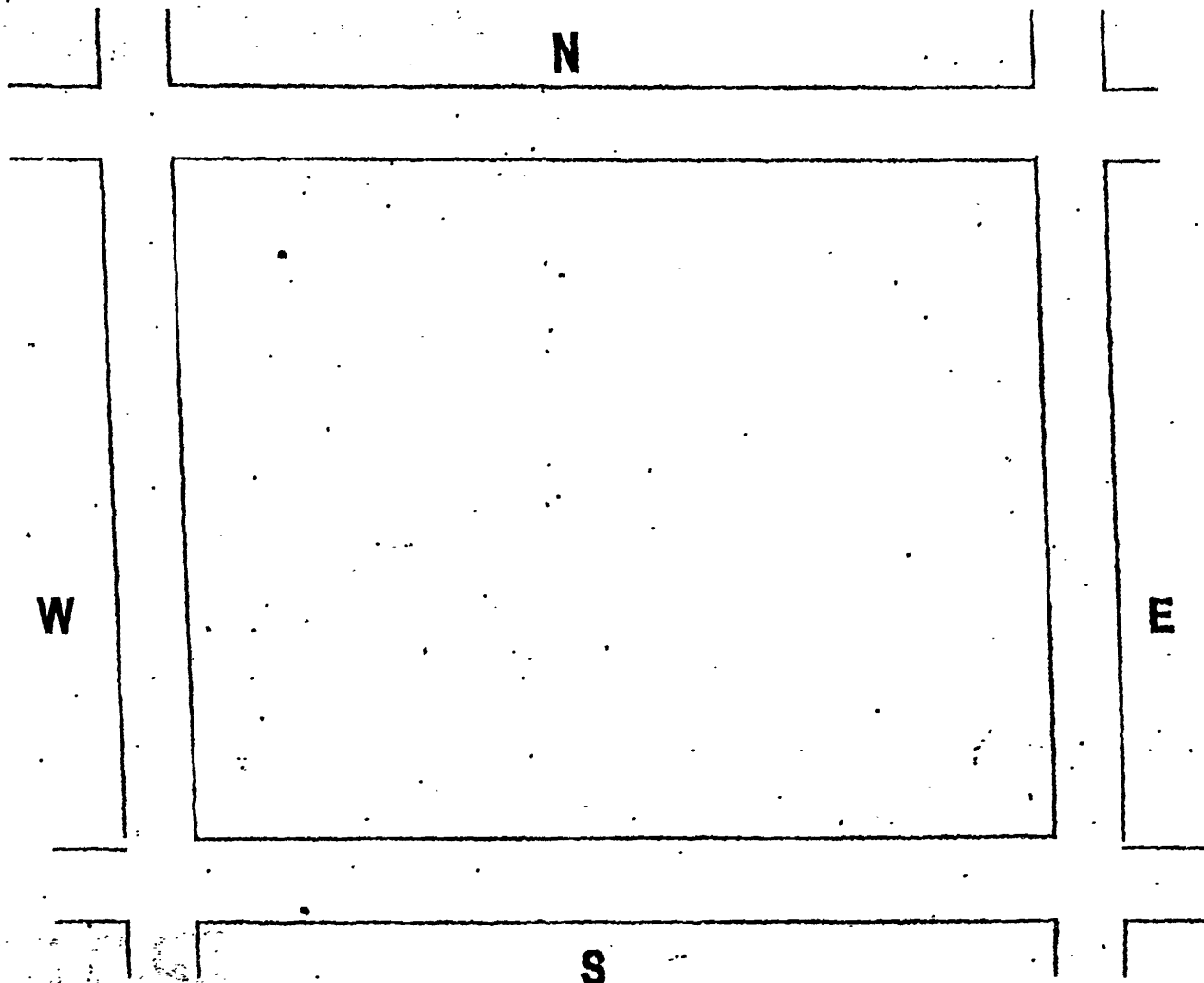
4-25-03

(Owner's Address)

375 WINDSOR Highway  
NW N.Y.

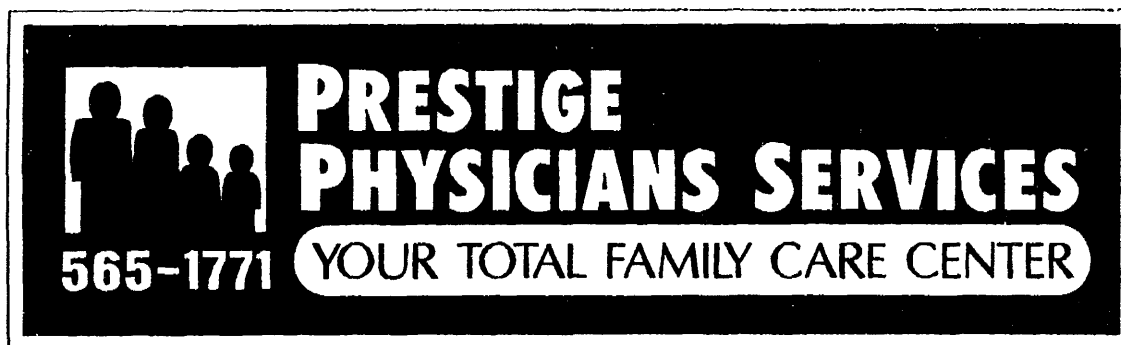
**NOTE:**

Locate all buildings and indicate all set back dimensions. Applicant must indicate the building line or lines clearly and distinctly on the drawings.



PLEASE ALLOW FIVE TO TEN DAYS TO PROCESS  
IMPORTANT

3' x 10' SINGLE SIDED SIGN  
LIGHT GREY SIGN BODY WITH TRANSLUCENT TEAL BACKGROUND



Designed Exclusively for:	Date: 4/23/03
Address:	Phone:
The Prices, Specifications, and Conditions as Described are Satisfactory and are Hereby Accepted. You Are Authorized to do the Work as Specified. Signature _____	
50% DEPOSIT REQUIRED ON ALL WORK. BALANCE DUE ON COMPLETION	

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**ACORD CERTIFICATE OF LIABILITY INSURANCE**DATE (MM/DD/YYYY)  
04/25/2003

PRODUCER

ABRAMS & STELLEFSON  
INSURANCE AGENCY LLC  
98 GRAND ST  
NEWBURGH, NY 12550

845-565-7894

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND OFFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED

SIGN LANGUAGE INC.  
182 OLD ROUTE 9  
FISHKILL, NY 12624

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: NAUTUS INSURANCE COMPANY

INSURER B: PROGRESSIVE INSURANCE COMPANY

INSURER C: PRINETON INSURANCE COMPANY

INSURER D:

INSURER E:

**COVERAGES**

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSURANCE TYPE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
<b>A GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> GENL AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	02957859	05/20/02	05/20/03	EACH OCCURRENCE \$ 1MILLION DAMAGE TO RENTED PREMISES (EA occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1MILLION GENERAL AGGREGATE \$ 2MILLION PRODUCTS & COM/OP AGG \$ 2MILLION
<b>B AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	CA017011450	05/20/02	05/20/03	COMBINED SINGLE LIMIT (EA accident) \$ 300,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
<b>CARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
<b>C WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/ MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	WC31019155	05/20/02	05/20/03	<input checked="" type="checkbox"/> WORK STATUS LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 100,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

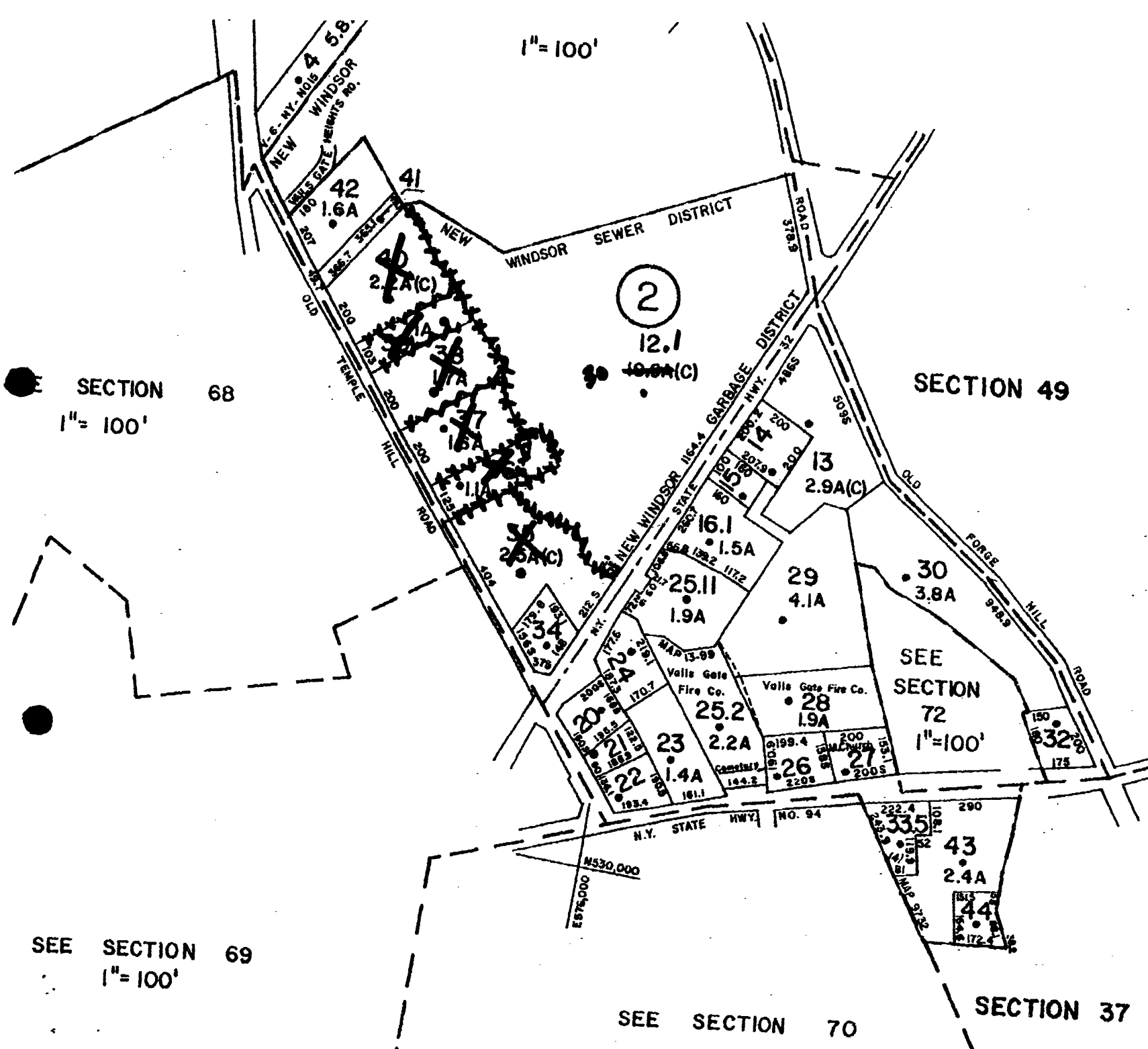
SIGN INSTALLATION

LOCATION OF WORK: NEW WINDSOR DENTAL BUILDING

**CERTIFICATE HOLDER**TOWN OF NEW WINDSOR  
555 UNION AVE.  
NEW WINDSOR, NY 12553**CANCEL LAT ON**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THE REOF THE ISSUING INSURER WILL ENDEAVOR TO MAIL 15 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORISED REPRESENTATIVE



PLEASE ALLOW FIVE TO TEN DAYS TO PROCESS  
**IMPORTANT**  
I MUST CALL FOR ALL REQUIRED INSPECTIONS OF CONSTRUCTION

Other inspections will be made in most cases but those listed below must be made or Certificate of Occupancy may be withheld. Do not mistake an unscheduled inspection for one of those listed below. Unless an inspection report is left on the job indicating approval of one of these inspections it has not been approved and it is improper to continue beyond that point in the work. Any disapproved work must be reinspected after correction.

1. When excavating is complete and footing forms are in place (before pouring.)
2. Foundation inspection. Check here for waterproofing and footing drains.
3. Inspect gravel base under concrete floors and under slab plumbing.
4. When framing, rough plumbing, rough electric and before being covered.
5. Insulation.
6. Final inspection for Certificate of Occupancy. Have on hand electrical inspection data and final certified plot plan. Building is to be completed at this time. Well water test required and engineer's certification letter for septic system required.
7. Driveway inspection must meet approval of Town Highway Superintendent. A driveway pond may be required.
8. \$50.00 charge for any site that calls for the inspection twice.
9. Call 24 hours in advance, with permit number, to schedule inspection.
10. There will be no inspections unless yellow permit card is posted.
11. Sewer permits must be obtained along with building permits for new houses.
12. Septic permit must be submitted with engineer's drawing and percolation test.
13. Road opening permits must be obtained from Town Clerk's office.
14. All building permits will need a Certificate of Occupancy or a Certificate of Compliance and there is no fee for this.

FOR OFFICE USE ONLY:

Building Permit #: PA 2003-0385

**AFFIDAVIT OF OWNERSHIP AND/OR CONTRACTOR'S COMP & LIABILITY INSURANCE CERTIFICATE IS  
REQUIRED BEFORE THE BUILDING PERMIT APPLICATION WILL BE ACCEPTED AND/OR ISSUED**

PLEASE PRINT CLEARLY - FILL OUT ALL INFORMATION WHICH APPLIES TO YOU

Owner of Premises NEW WINDSOR DENTAL MANAGEMENT CORP

Address 375 WINDSOR HIGHWAY

Phone # 565-6677

Mailing Address \_\_\_\_\_

Fax # \_\_\_\_\_

Name of Architect \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Name of Contractor SIGN LANGUAGE INC.

Address 182 OLD 119 FISHKILL N.Y. Phone 896-2156

State whether applicant is owner, lessee, agent, architect, engineer or builder BUILDER

If applicant is a corporation, signature of duly authorized officer. THOMAS WILSON PRES SIGN LANGUAGE INC  
(Name and title of corporate officer)

1. On what street is property located? On the \_\_\_\_\_ side of \_\_\_\_\_  
(N, S, E or W)  
and \_\_\_\_\_ feet from the intersection of \_\_\_\_\_

2. Zone or use district in which premises are situated \_\_\_\_\_ Is property a flood zone? Y \_\_\_\_\_ N \_\_\_\_\_

3. Tax Map Description: Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

4. State existing use and occupancy of premises and intended use and occupancy of proposed construction.

a. Existing use and occupancy \_\_\_\_\_ b. Intended use and occupancy \_\_\_\_\_

5. Nature of work (check if applicable) ☐ New Bldg. ☐ Addition ☐ Alteration ☐ Repair ☐ Removal ☐ Demolition ☒ Other SIGN

6. Is this a corner lot? \_\_\_\_\_

3' x 10'

7. Dimensions of entire new construction. Front \_\_\_\_\_ Rear \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_ No. of stories \_\_\_\_\_

8. If dwelling, number of dwelling units: \_\_\_\_\_ Number of dwelling units on each floor \_\_\_\_\_

Number of bedrooms \_\_\_\_\_ Baths \_\_\_\_\_ Toilets \_\_\_\_\_ Heating Plant: Gas \_\_\_\_\_ Oil \_\_\_\_\_  
Electric/Hot Air \_\_\_\_\_ Hot Water \_\_\_\_\_ If Garage, number of cars \_\_\_\_\_

9. If business, commercial or mixed occupancy, specify nature and extent of each type of use \_\_\_\_\_

10. Estimated cost \_\_\_\_\_

Fee 50 part of  
ck # 3219

**PAID**

\_\_\_\_/\_\_\_\_/\_\_\_\_  
date

APPLICATION FOR BUILDING PERMIT  
TOWN OF NEW WINDSOR, ORANGE COUNTY, NEW YORK  
Pursuant to New York State Building Code and Town Ordinances

Building Inspector: Michael L. Babcock  
Asst. Inspectors: Frank Lisi & Louis Kryshear  
New Windsor Town Hall  
555 Union Avenue  
New Windsor, New York 12553  
(845) 563-4818  
(845) 563-4895 FAX

Bldg Insp Examined \_\_\_\_\_  
Fire Insp Examined \_\_\_\_\_  
Approved \_\_\_\_\_  
Disapproved \_\_\_\_\_  
Permit No. \_\_\_\_\_

INSTRUCTIONS

- This application must be completely filled in by typewriter or in ink and submitted to the Building Inspector.
- Plot plan showing location of lot and buildings on premises, relationship to adjoining premises or public streets or areas, and giving a detailed description of layout of property must be drawn on the diagram, which is part of this application.
- This application must be accompanied by two complete sets of plans showing proposed construction and two complete sets of specifications. Plans and specifications shall describe the nature of the work to be performed, the materials and equipment to be used and installed and details of structural, mechanical and plumbing installations.
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- Upon approval of this application, the Building Inspector will issue a Building Permit to the applicant together with approved set of plans and specifications. Such permit and approved plans and specifications shall be kept on the premises, available for inspection throughout the progress of the work.
- No building shall be occupied or used in whole or in part for any purpose whatever until a Certificate of Occupancy shall have been granted by the Building Inspector.

APPLICATION IS HEREBY MADE to the Building Inspector for the issuance of a Building Permit pursuant to the New York Building Construction Code Ordinances of the Town of New Windsor for the construction of buildings, additions, or alterations, or for removal or demolition or use of property as herein described. The applicant agrees to comply with all applicable laws, ordinances, regulations and certifies that he is the owner or agent of all that certain lot, piece or parcel of land and/or building described in this application and if not the owner, that he has been duly and properly authorized to make this application and to assume responsibility for the owner in connection with this application.

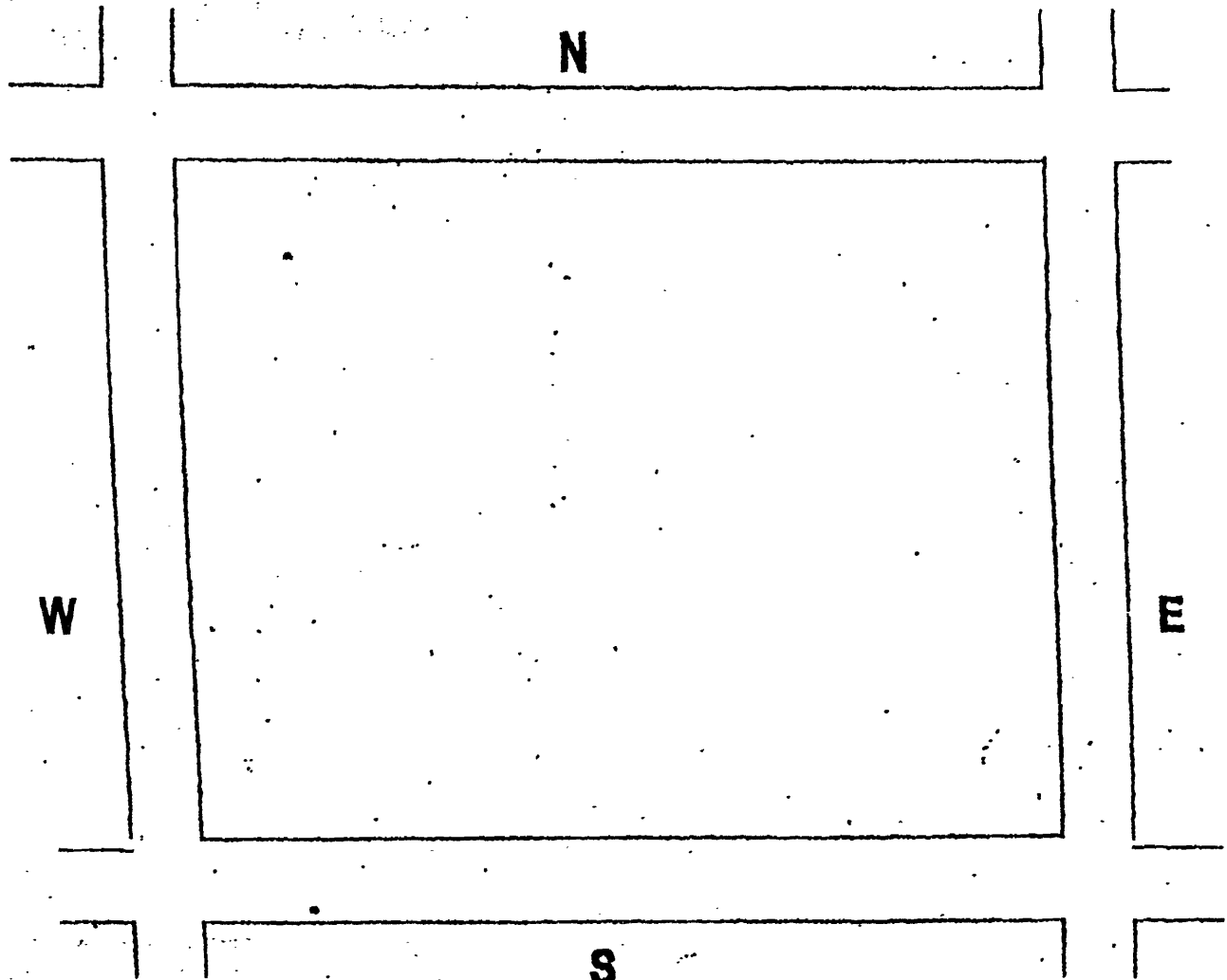
Thomas A. W. R. P. 25 INC  
(Signature of Applicant)

182 ~~RD~~ RD 9, FISHKILL NY 12524  
(Address of Applicant)

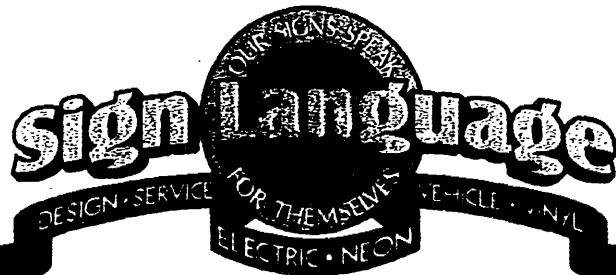
[Signature]  
(Owner's Signature)

375 WINDSOR HTS  
(Owner's Address)

**NOTE:** Locate all buildings and indicate all set back dimensions. Applicant must indicate the building line or lines clearly and distinctly on the drawings.

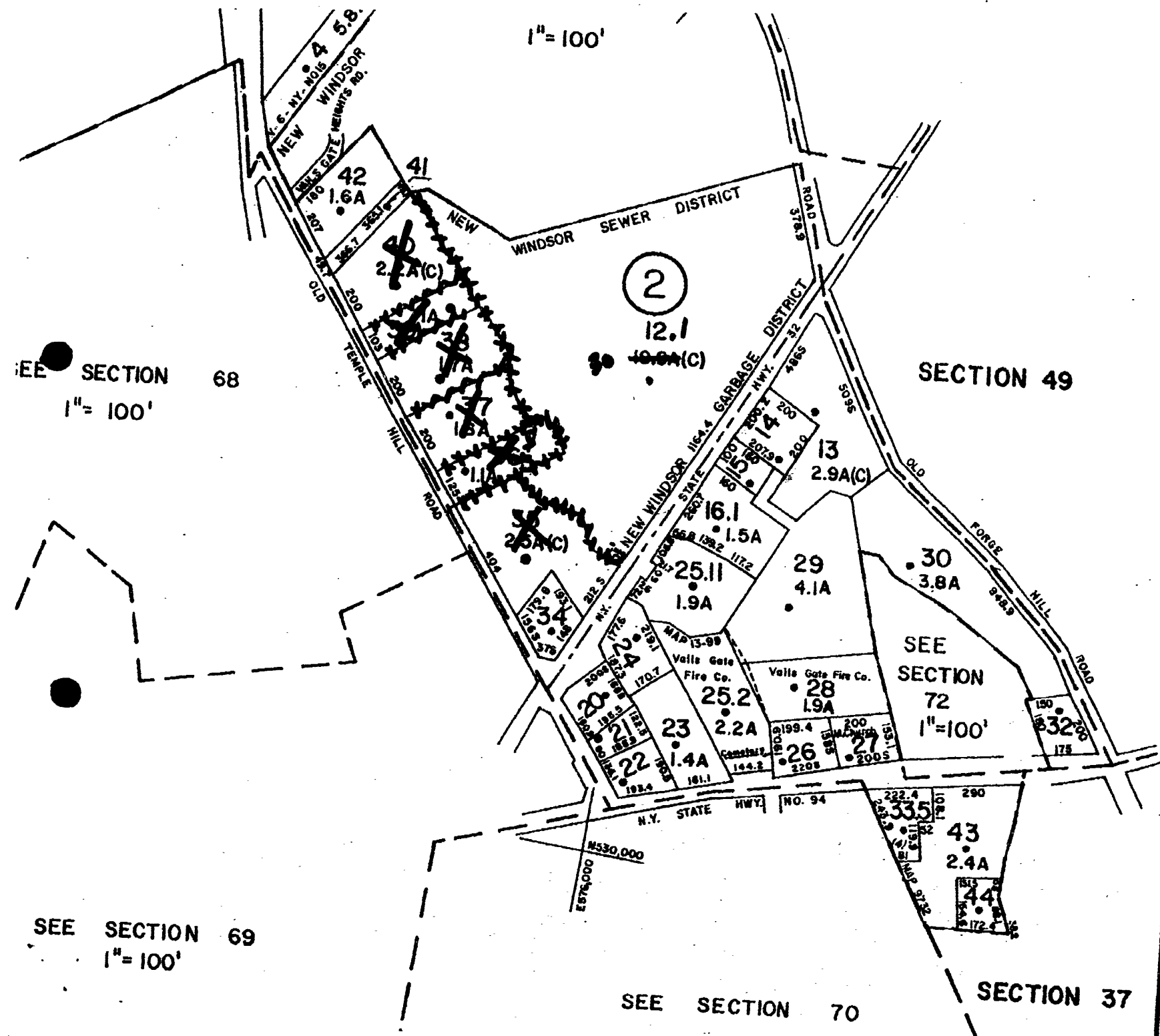


3' x 10' SINGLE SIDED SIGN  
LIGHT GREY SIGN BODY WITH TRANSLUCENT TEAL BACKGROUND



Designed Exclusively for:	Date: 4/23/03
Address:	Phone:
The Prices, Specifications, and Conditions as Described are Satisfactory and are Hereby Accepted. You Are Authorized to do the Work as Specified. Signature _____	
50% DEPOSIT REQUIRED ON ALL WORK. BALANCE DUE ON COMPLETION	

This design is the sole property of Sign Language Inc., and may not be reproduced in any manner without written permission





PLEASE ALLOW FIVE TO TEN DAYS TO PROCESS  
**IMPORTANT**  
YOU MUST CALL FOR ALL REQUIRED INSPECTIONS OF CONSTRUCTION

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4. When framing, rough plumbing, rough electric and before being covered.
5. Insulation.
6. Final inspection for Certificate of Occupancy. Have on hand electrical inspection data and final certified plot plan. Building is to be completed at this time. Well water test required and engineer's certification letter for septic system required.
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9. Call 24 hours in advance, with permit number, to schedule inspection.
10. There will be no inspections unless yellow permit card is posted.
11. Sewer permits must be obtained along with building permits for new houses.
12. Septic permit must be submitted with engineer's drawing and percolation test.
13. Road opening permits must be obtained from Town Clerk's office.
14. All building permits will need a Certificate of Occupancy or a Certificate of Compliance and there is no fee for this.

FOR OFFICE USE ONLY:  
Building Permit #: 1A 203-0387

**AFFIDAVIT OF OWNERSHIP AND/OR CONTRACTOR'S COMP & LIABILITY INSURANCE CERTIFICATE IS REQUIRED BEFORE THE BUILDING PERMIT APPLICATION WILL BE ACCEPTED AND/OR ISSUED**

PLEASE PRINT CLEARLY - FILL OUT ALL INFORMATION WHICH APPLIES TO YOU

Owner of Premises NEW WINDSOR DENTAL MANAGEMENT CORP.

Address 375 WINDSOR HIGHWAY Phone # 565-6677

Mailing Address \_\_\_\_\_ Fax # \_\_\_\_\_

Name of Architect \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name of Contractor SUN LANGUAGE, INC.

Address 182 OLD AT 9 FISHKILL NY. Phone 896-2156

State whether applicant is owner, lessee, agent, architect, engineer or builder BUILDER

If applicant is a corporation, signature of duly authorized officer. Thomas A. Will PRES SWAN LANGUAGE INC.  
(Name and title of corporate officer)

1. On what street is property located? On the \_\_\_\_\_ side of \_\_\_\_\_  
(N, S, E or W)  
and \_\_\_\_\_ feet from the intersection of \_\_\_\_\_

2. Zone or use district in which premises are situated \_\_\_\_\_ Is property a flood zone? Y \_\_\_\_\_ N \_\_\_\_\_

3. Tax Map Description: Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

4. State existing use and occupancy of premises and intended use and occupancy of proposed construction.

a. Existing use and occupancy \_\_\_\_\_ b. Intended use and occupancy \_\_\_\_\_

5. Nature of work (check if applicable) ☐ New Bldg. ☐ Addition ☐ Alteration ☐ Repair ☐ Removal ☐ Demolition ☒ Other SCON

6. Is this a corner lot? \_\_\_\_\_ 3' x 10'

7. Dimensions of entire new construction. Front \_\_\_\_\_ Rear \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_ No. of stories \_\_\_\_\_

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Number of bedrooms \_\_\_\_\_ Baths \_\_\_\_\_ Toilets \_\_\_\_\_ Heating Plant: Gas \_\_\_\_\_ Oil \_\_\_\_\_  
Electric/Hot Air \_\_\_\_\_ Hot Water \_\_\_\_\_ If Garage, number of cars \_\_\_\_\_

9. If business, commercial or mixed occupancy, specify nature and extent of each type of use \_\_\_\_\_

10. Estimated cost \_\_\_\_\_

Fee \$50 part of  
ck 2.3219

**PAID**

\_\_\_\_/\_\_\_\_/\_\_\_\_  
date

APPLICATION FOR BUILDING PERMIT  
TOWN OF NEW WINDSOR, ORANGE COUNTY, New York  
Pursuant to New York State Building Code and Town Ordinances

Building Inspector: Michael L. Babcock  
Asst. Inspectors: Frank Lisi & Louis Kryshner  
New Windsor Town Hall  
655 Union Avenue  
New Windsor, New York 12553  
(845) 563-4818  
(845) 563-4895 FAX

Bldg Insp Examined \_\_\_\_\_  
Fire Insp Examined \_\_\_\_\_  
Approved \_\_\_\_\_  
Disapproved \_\_\_\_\_  
Permit No. \_\_\_\_\_

INSTRUCTIONS

- A. This application must be completely filled in by typewriter or in ink and submitted to the Building Inspector.
- B. Plot plan showing location of lot and buildings on premises, relationship to adjoining premises or public streets or areas, and giving a detailed description of layout of property must be drawn on the diagram, which is part of this application.
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Thomas A. W. H. PRES  
(Signature of Applicant)

182 OLD RT 9, FISHKILL, NY 12524  
(Address of Applicant)

[Signature]  
(Owner's Signature)

375 WINDSOR Highway

100

# W

# N

# E

3

3' x 10' SINGLE SIDED SIGN  
LIGHT GREY SIGN BODY WITH TRANSLUCENT TEAL BACKGROUND



Designed  
Exclusively for:

Date: 4/23/03

Address:

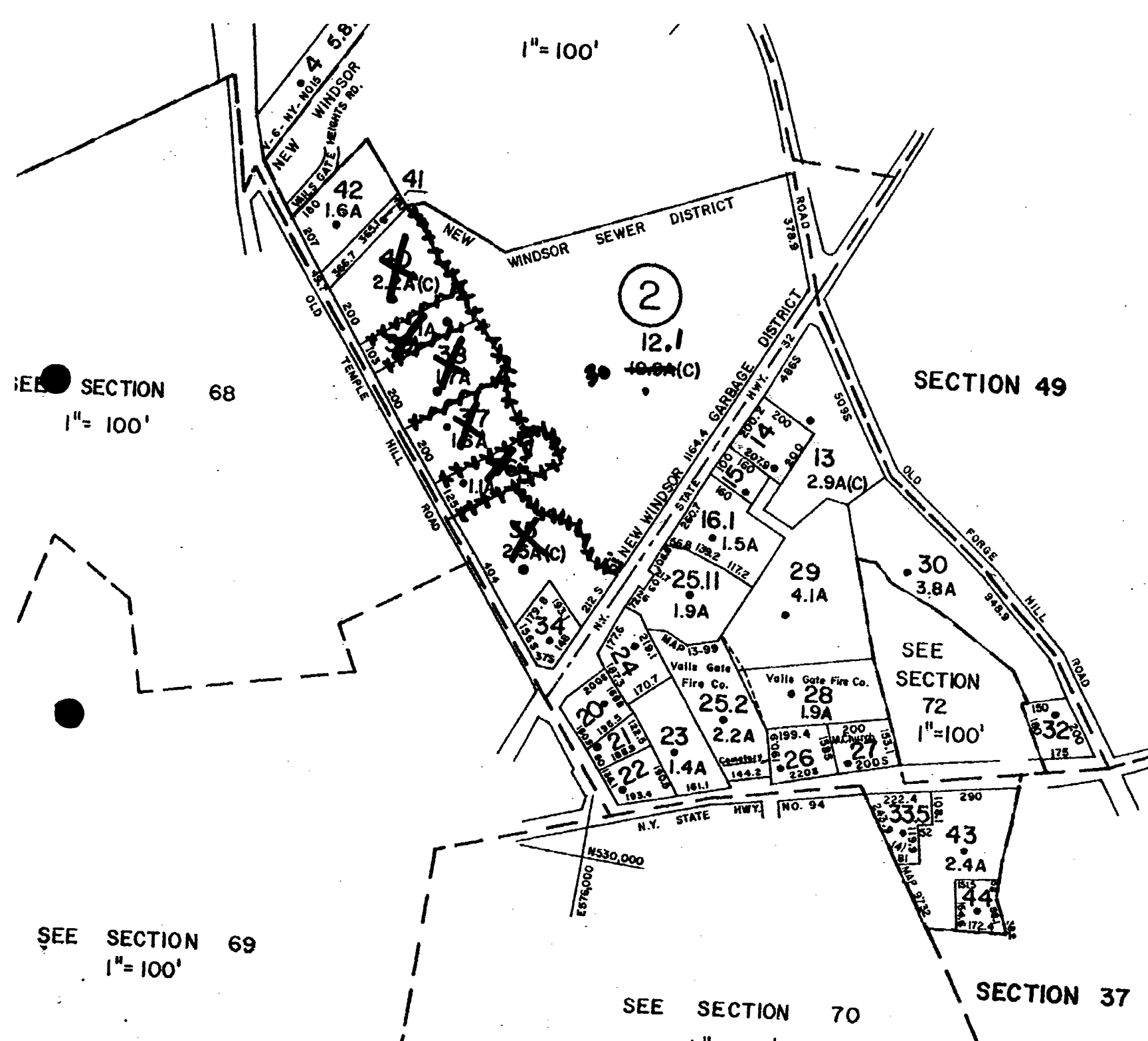
Phone:

The Prices, Specifications, and Conditions as Described are  
Satisfactory and are Hereby Accepted. You Are Authorized to do  
the Work as Specified.

Signature \_\_\_\_\_

**50% DEPOSIT REQUIRED ON ALL  
WORK. BALANCE DUE ON  
COMPLETION**

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PLEASE ALLOW FIVE TO TEN DAYS TO PROCESS  
IMPORTANT  
YOU MUST CALL FOR ALL REQUIRED INSPECTIONS OF CONSTRUCTION

Other inspections will be made in most cases but those listed below must be made or Certificate of Occupancy may be withheld. Do not mistake an unscheduled inspection for one of those listed below. Unless an inspection report is left on the job indicating approval of one of these inspections it has not been approved and it is improper to continue beyond that point in the work. Any disapproved work must be reinspected after correction.

1. When excavating is complete and footing forms are in place (before pouring.)
2. Foundation inspection. Check here for waterproofing and footing drains.
3. Inspect gravel base under concrete floors and under slab plumbing.
4. When framing, rough plumbing, rough electric and before being covered.
5. Insulation.
6. Final inspection for Certificate of Occupancy. Have on hand electrical inspection data and final certified plot plan. Building is to be completed at this time. Well water test required and engineer's certification letter for septic system required.
7. Driveway inspection must meet approval of Town Highway Superintendent. A driveway bond may be required.
8. \$50.00 charge for any site that calls for the inspection twice.
9. Call 24 hours in advance, with permit number, to schedule inspection.
10. There will be no inspections unless yellow permit card is posted.
11. Sewer permits must be obtained along with building permits for new houses.
12. Septic permit must be submitted with engineer's drawing and perc test.
13. Road opening permits must be obtained from Town Clerk's office.
14. All building permits will need a Certificate of Occupancy or a Certificate of Compliance and here is no fee for this.

FOR OFFICE USE ONLY:  
Building Permit #: 2003-0386

**AFFIDAVIT OF OWNERSHIP AND/OR CONTRACTOR'S COMP & LIABILITY INSURANCE CERTIFICATE IS REQUIRED BEFORE THE BUILDING PERMIT APPLICATION WILL BE ACCEPTED AND/OR ISSUED**

PLEASE PRINT CLEARLY - FILL OUT ALL INFORMATION WHICH APPLIES TO YOU

Owner of Premises NEW WINDSOR DENTAL MANAGEMENT CORP

Address 375 WINDSOR HIGHWAY Phone # 565-6677

Mailing Address \_\_\_\_\_ Fax # \_\_\_\_\_

Name of Architect \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name of Contractor SGN LANGUAGE INC

Address 182 OLD PT 9 FISHKILL NY Phone 896-2156

State whether applicant is owner, lessee, agent, architect, engineer or builder BUILDER

If applicant is a corporation, signature of duly authorized officer. Thomas A. Will PRES SIGN LANGUAGE NC  
(Name and title of corporate officer)

1. On what street is property located? On the \_\_\_\_\_ side of \_\_\_\_\_  
(N, S, E or W)  
and \_\_\_\_\_ feet from the intersection of \_\_\_\_\_
2. Zone or use district in which premises are situated \_\_\_\_\_ is property a flood zone? Y \_\_\_\_\_ N \_\_\_\_\_
3. Tax Map Description: Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_
4. State existing use and occupancy of premises and intended use and occupancy of proposed construction.  
a. Existing use and occupancy \_\_\_\_\_ b. Intended use and occupancy \_\_\_\_\_
5. Nature of work (check if applicable) ☐ New Bldg. ☐ Addition ☐ Alteration ☐ Repair ☐ Removal ☐ Demolition ☒ Other SIGN 3'x10'
6. Is this a corner lot? \_\_\_\_\_
7. Dimensions of entire new construction. Front \_\_\_\_\_ Rear \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_ No. of stories \_\_\_\_\_
8. If dwelling, number of dwelling units: \_\_\_\_\_ Number of dwelling units on each floor \_\_\_\_\_  
Number of bedrooms \_\_\_\_\_ Baths \_\_\_\_\_ Toilets \_\_\_\_\_ Heating Plant: Gas \_\_\_\_\_ Oil \_\_\_\_\_  
Electric/Hot Air \_\_\_\_\_ Hot Water \_\_\_\_\_ If Garage, number of cars \_\_\_\_\_
9. If business, commercial or mixed occupancy, specify nature and extent of each type of use \_\_\_\_\_

10. Estimated cost \_\_\_\_\_

Fee \$50 per sq ft  
# 3219

**PAID**



date

APPLICATION FOR BUILDING PERMIT  
TOWN OF NEW WINDSOR, ORANGE COUNTY, NEW YORK  
Pursuant to New York State Building Code and Town Ordinances

Building Inspector: Michael L. Babcock  
Asst. Inspectors: Frank Liel & Louis Kryshaar  
New Windsor Town Hall  
655 Union Avenue  
New Windsor, New York 12553  
(845) 583-4818  
(845) 583-4895 FAX

Bldg Insp Examined \_\_\_\_\_  
Fire Insp Examined \_\_\_\_\_  
Approved \_\_\_\_\_  
Disapproved \_\_\_\_\_  
Permit No. \_\_\_\_\_

INSTRUCTIONS

- A. This application must be completely filled in by typewriter or in ink and submitted to the Building Inspector.
- B. Plot plan showing location of lot and buildings on premises, relationship to adjoining premises or public streets or areas, and giving a detailed description of layout of property must be drawn on the diagram, which is part of this application.
- C. This application must be accompanied by two complete sets of plans showing proposed construction and two complete sets of specifications. Plans and specifications shall describe the nature of the work to be performed, the materials and equipment to be used and installed and details of structural, mechanical and plumbing installations.
- D. The work covered by this application may not be commenced before the issuance of a Building Permit.
- E. Upon approval of this application, the Building Inspector will issue a Building Permit to the applicant together with approved set of plans and specifications. Such permit and approved plans and specifications shall be kept on the premises, available for inspection throughout the progress of the work.
- F. No building shall be occupied or used in whole or in part for any purpose whatever until a Certificate of Occupancy shall have been granted by the Building Inspector.

APPLICATION IS HEREBY MADE to the Building Inspector for the issuance of a Building Permit pursuant to the New York Building Construction Code Ordinances of the Town of New Windsor for the construction of buildings, additions, or alterations, or for removal or demolition or use of property as herein described. The applicant agrees to comply with all applicable laws, ordinances, regulations and certifies that he is the owner or agent of all that certain lot, piece or parcel of land and/or building described in this application and if not the owner, that he has been duly and properly authorized to make this application and to assume responsibility for the owner in connection with this application.

Thomas A. M. C. PRES. INC.  
(Signature of Applicant)

SIGN  
JANUARY

182 OLD PT 9 FISHKILL NY 12524

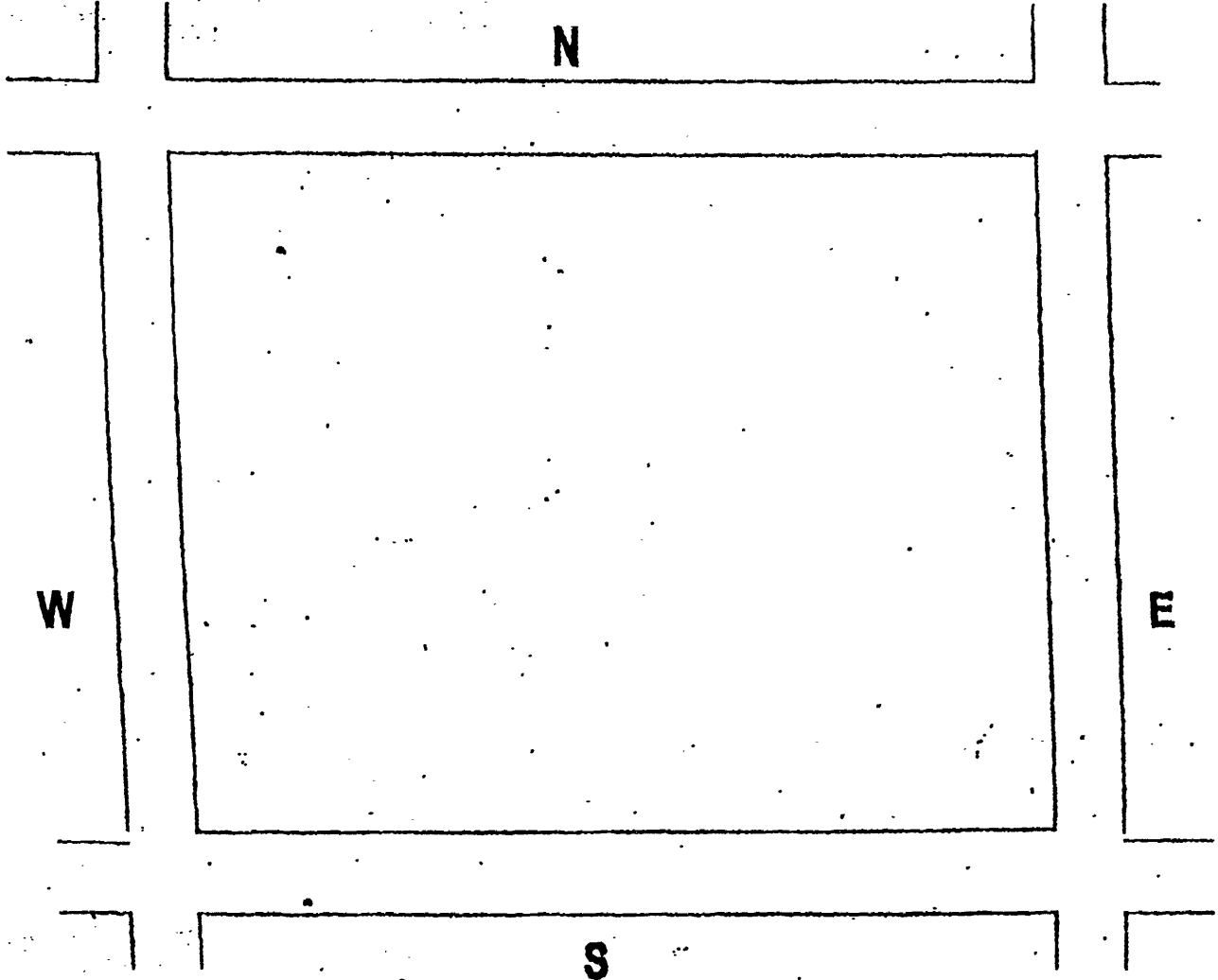
(Address of Applicant)

375 Windsor Ht. N.Y.

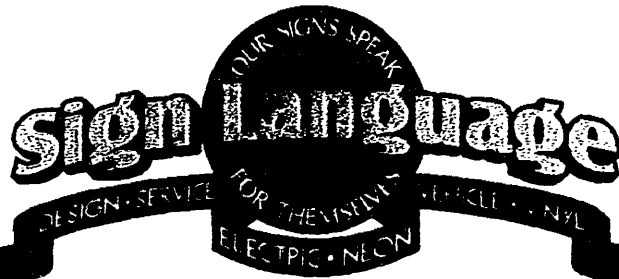
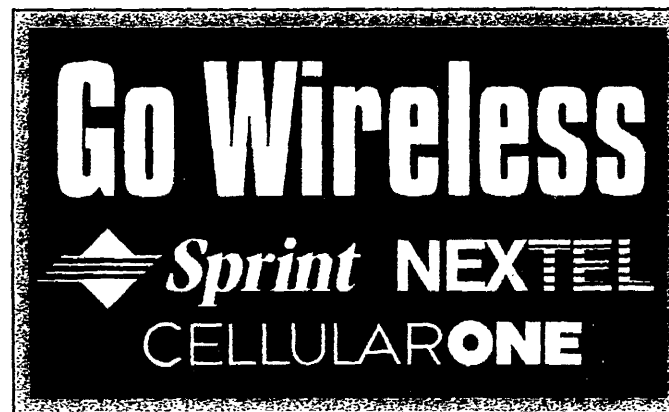
(Owner's Signature)

**PLOT PLAN**

**NOTE:** Locate all buildings and indicate all set back dimensions. Applicant must indicate the building line or lines clearly and distinctly on the drawings.

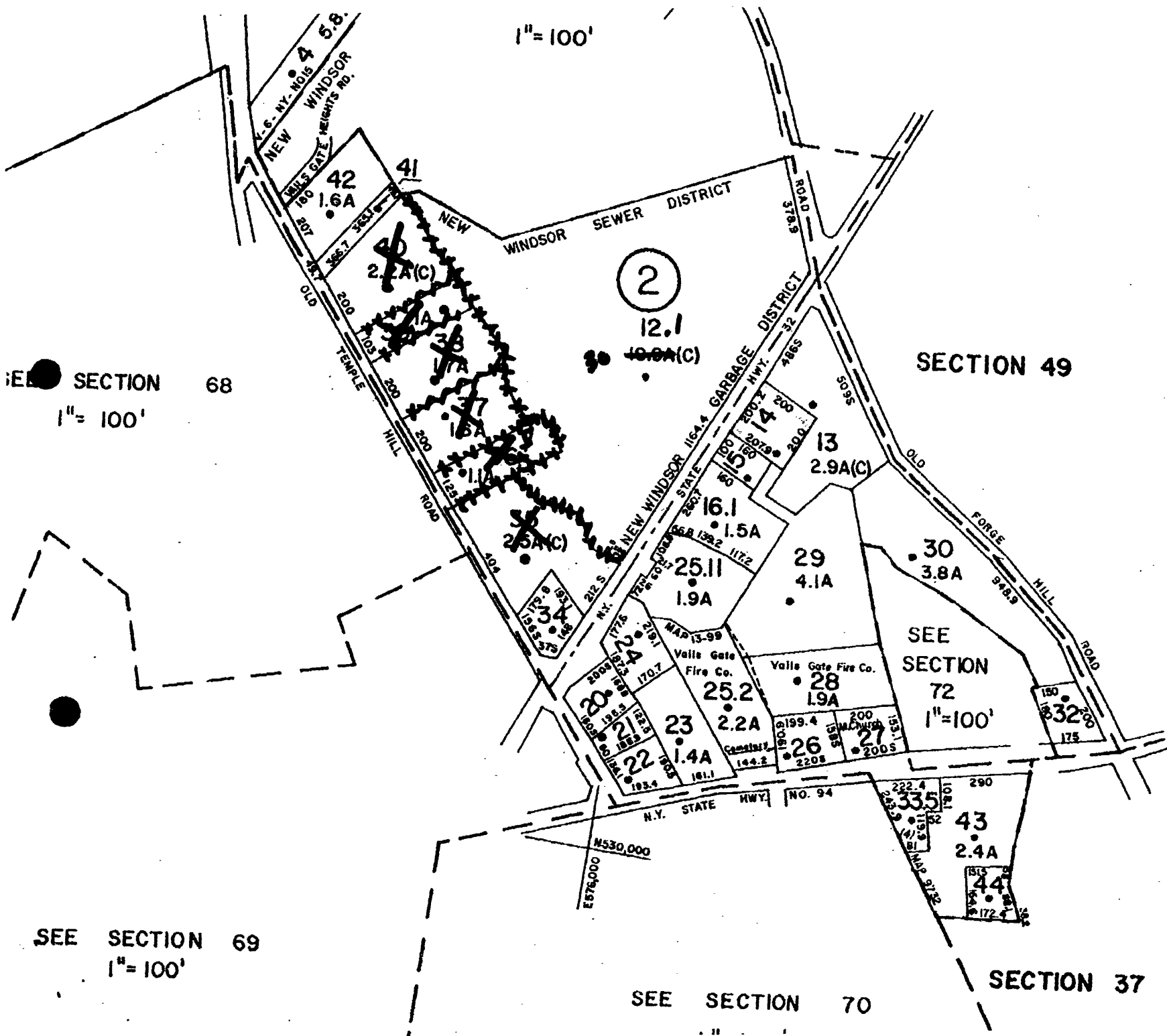


3' x 5' single sided electric sign  
light grey sign body with teal translucent background



Designed Exclusively for:	Date: 4/23/03
Address:	Phone:
The Prices, Specifications, and Conditions as Described are Satisfactory and are Hereby Accepted. You Are Authorized to do the Work as Specified. Signature _____	
50% DEPOSIT REQUIRED ON ALL WORK. BALANCE DUE ON COMPLETION	

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1"=100'

SECTION 68  
1"=100'

SECTION 49

SEE SECTION 72  
1"=100'

SEE SECTION 69  
1"=100'

SEE SECTION 70

SECTION 37

PLEASE ALLOW FIVE TO TEN DAYS TO PROCESS  
IMPORTANT

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5. Insulation.
6. Final inspection for Certificate of Occupancy. Have on hand electrical inspection data and final certified plot plan. Building is to be completed at this time. Well water test required and engineer's certification letter for septic system required.
7. Driveway inspection must meet approval of Town Highway Superintendent. A driveway pond may be required.
8. \$50.00 charge for any site that calls for the inspection twice.
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11. Sewer permits must be obtained along with building permits for new houses.
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13. Road opening permits must be obtained from Town Clerk's office.
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FOR OFFICE USE ONLY:

Building Permit #: 2003-0384

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PLEASE PRINT CLEARLY - FILL OUT ALL INFORMATION WHICH APPLIES TO YOU

Owner of Premises NEW WINDSOR DENTAL MANAGEMENT CORP

Address 375 WINDSOR HIGHWAY

Phone # 565-6677

Mailing Address \_\_\_\_\_

Fax # \_\_\_\_\_

Name of Architect \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Name of Contractor SIGN LANGUAGE INC.

Address 182 OLD RT 9 FISHKILL NY Phone 896-2156

State whether applicant is owner, lessee, agent, architect, engineer or builder BUILDER

If applicant is a corporation, signature of duly authorized officer. Thomas C. Wick PRES SIGN LANGUAGE INC  
(Name and title of corporate officer)

1. On what street is property located? On the \_\_\_\_\_ side of \_\_\_\_\_  
(N, S, E or W)  
and \_\_\_\_\_ feet from the intersection of \_\_\_\_\_
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5. Nature of work (check if applicable) ☐ New Bldg. ☐ Addition ☐ Alteration ☐ Repair ☐ Removal ☐ Demolition ☒ Other SIGN 3'x10'
6. Is this a corner lot? \_\_\_\_\_
7. Dimensions of entire new construction. Front \_\_\_\_\_ Rear \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_ No. of stories \_\_\_\_\_
8. If dwelling, number of dwelling units: \_\_\_\_\_ Number of dwelling units on each floor \_\_\_\_\_  
Number of bedrooms \_\_\_\_\_ Baths \_\_\_\_\_ Toilets \_\_\_\_\_ Heating Plant: Gas \_\_\_\_\_ Oil \_\_\_\_\_  
Electric/Hot Air \_\_\_\_\_ Hot Water \_\_\_\_\_ If Garage, number of cars \_\_\_\_\_
9. If business, commercial or mixed occupancy, specify nature and extent of each type of use \_\_\_\_\_  
\_\_\_\_\_
10. Estimated cost \_\_\_\_\_ Fee \$50 part of ct # 3219

**PAID**

date

APPLICATION FOR BUILDING PERMIT  
TOWN OF NEW WINDSOR, ORANGE COUNTY, New York  
Pursuant to New York State Building Code and Town Ordinances

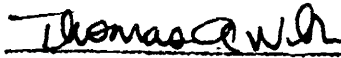
Building Inspector: Michael L. Babcock  
Asst. Inspectors: Frank Lal & Louis Kryshner  
New Windsor Town Hall  
555 Union Avenue  
New Windsor, New York 12553  
(845) 563-4818  
(845) 563-4895 FAX

Bldg Insp Examined \_\_\_\_\_  
Fire Insp Examined \_\_\_\_\_  
Approved \_\_\_\_\_  
Disapproved \_\_\_\_\_  
Permit No. \_\_\_\_\_


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(Signature of Applicant)

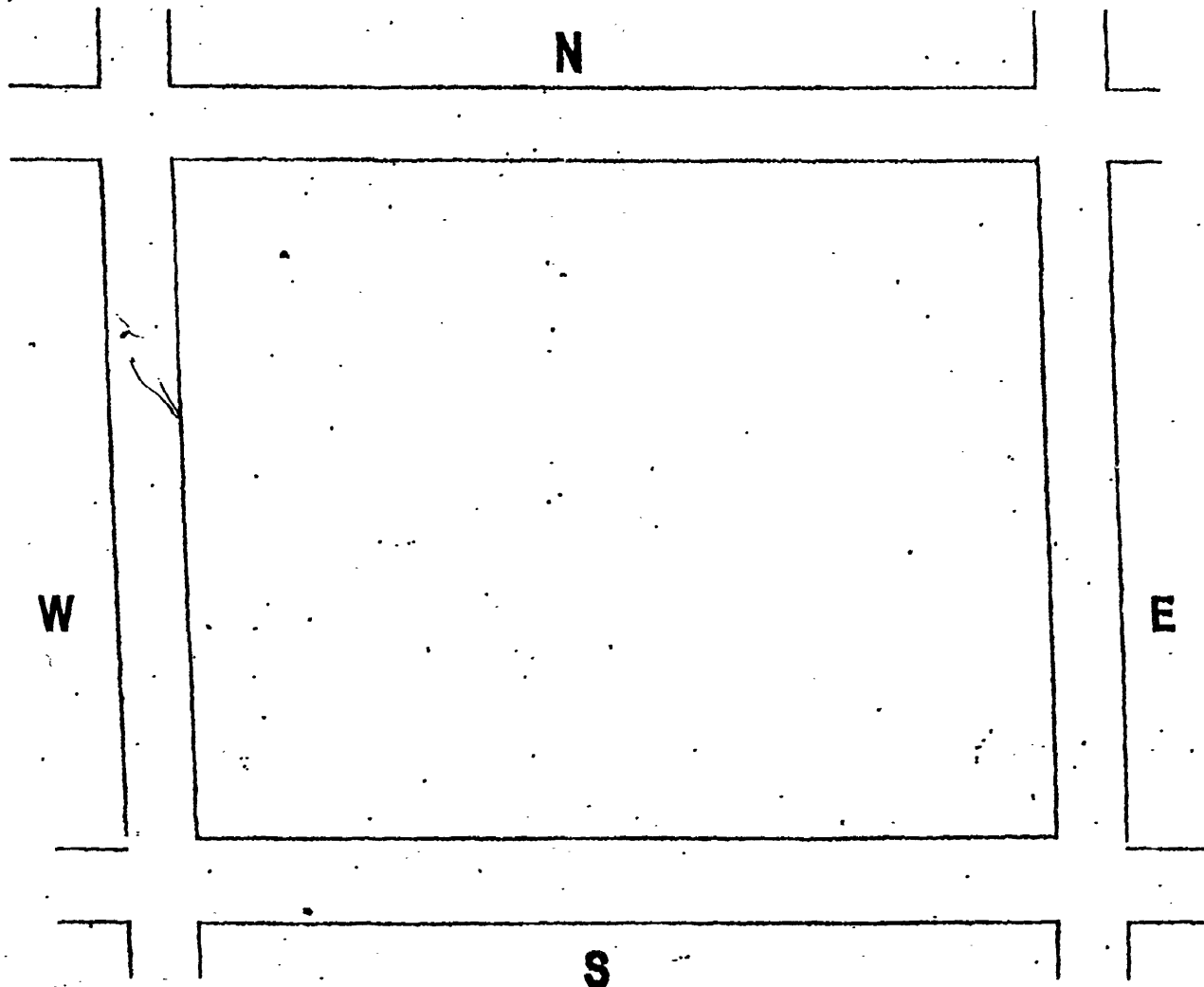
 CLW  
PRES. CHANGING INC 182 ODDER, FISHKILL NY 12524  
(Address of Applicant)

  
(Owner's Signature)

375 WINDSOR 11/12/11  
(Owner's Address)

NEW WINDSOR

**NOTE:** Locate all buildings and indicate all set back dimensions. Applicant must indicate the building line or lines clearly and distinctly on the drawings.







RESULTS OF Z.B.A. MEETING OF:

July 14, 2003

PROJECT: N.W. Dental

ZBA # 03-26

P.B.#



USE VARIANCE:

NEED: EAF

PROXY

LEAD AGENCY: M)      S)      VOTE: A      N       
RIVERA       
MCDONALD      CARRIED: Y      N       
REIS       
KANE       
TORLEY     

NEGATIVE DEC: M)      S)      VOTE: A      N       
RIVERA       
MCDONALD      CARRIED: Y      N       
REIS       
KANE       
TORLEY     

PUBLIC HEARING: M)      S)      VOTE: A      N       
RIVERA       
MCDONALD      CARRIED: Y      N       
REIS       
KANE       
TORLEY     

APPROVED: M)      S)      VOTE: A      N       
RIVERA       
MCDONALD      CARRIED: Y      N       
REIS       
KANE       
TORLEY     

ALL VARIANCES - PRELIMINARY APPEARANCE:

SCHEDULE PUBLIC HEARING:

M)      S)     

VOTE: A      N     

RIVERA       
MCDONALD       
REIS       
KANE       
TORLEY     

CARRIED: Y      N     

PUBLIC HEARING:

STATEMENT OF MAILING READ INTO MINUTES      ✓

VARIANCE APPROVED:

M) RV S) RS VOTE: A 3 N 0.

RIVERA 17  
~~MCDONALD~~       
REIS 4  
KANE 4  
~~TORLEY~~       
MINUTA 46

CARRIED: Y ✓ N     .

Cut size of one sign

No - flashing signs

6"

NEW WINDSOR DENTAL MANAGEMENT CORP. (#03-26)

MR. TORLEY: Request for 6 inch height variance for each of seven signs on facade of building and request for six inch height and five feet width variance for sign at Radiance Tanning Studio at 375 Windsor Highway, Suite 300 in a C zone.

Mr. Tom Walsh from Sign Language appeared before the board for this proposal.

MR. TORLEY: Seven signs?

MR. WALSH: It's an entire plaza, it was a renovation and they renovated the whole thing.

MR. TORLEY: So I have a question for you, these are all these signs are now existing?

MR. WALSH: Excuse me?

MR. TORLEY: You're asking for a variance for the signs that are there now?

MR. WALSH: No, these are superimposed on the photograph.

MR. TORLEY: All right, since the signs don't exist now, why can't they be six inches smaller?

MR. WALSH: Well, the way we laid it out on the fascia bringing them smaller they kind of get lost on the fascia. The owner of the premises feels also in a lot of these logos as you condense the sign, it distorts the letters and the logos, the look of their particular logos and on most of these, except for a couple of them, you know, they fit within those parameters. We did not expand the width on these signs.

MR. TORLEY: So the length of these signs?

MR. WALSH: We're only asking for six inches which would allow them to work.

MR. KANE: The picture is superimposed on the facade,

that's actual size?

MR. WALSH: Yes.

MR. MC DONALD: You have a lot of free space around it.

MR. WALSH: Yeah, well, on signs when you have a lot of free space, the negative space actually makes it easier to look at and more pleasing for the people that are looking at it and when you're going by the plaza at speeds of 45 miles per hour, it's a little easier to see a less crowded sign.

MR. TORLEY: These are going to be how illuminated?

MR. WALSH: Internally illuminated.

MR. TORLEY: No neon, no flashing?

MR. WALSH: The Radiance was the only one that was slightly different, he wanted to go with the channel letters which is similar.

MR. TORLEY: Nothing flashing?

MR. WALSH: No, nothing is flashing. The Radiance sign I believe I have that in there, is that a separate issue?

MS. MASON: It's attached.

MR. KANE: It's all under the same thing.

MR. WALSH: I believe it looks just like this one, that's a different one that you're looking at, sir, that's an existing one that's currently on the facade.

MR. KANE: Well, I personally don't have too much of a problem with the six inch difference on the height on the one side, the five feet extra length we can't do anything about?

MR. TORLEY: That's the Radiance?

MR. KANE: Yes.

MR. WALSH: My customer there is, he has three, four different stores, three different Radiance stores, one's in New Paltz with the same exact sign. Then I think he has another one, I don't know where it is exactly, but he's trying to keep the same image as the franchise with that same look and with his name being as long as it is with a sign, he's staying within the same height parameters of all the rest, but with the way it lays out, it expands longer than the other signs by two feet, I'm sorry, by--

MR. TORLEY: Four feet six inches.

MR. WALSH: Yeah.

MR. TORLEY: That's a substantial, tell you the truth, that looks, Windsor Dental PC, the Windsor Dental PC, that sign's going to meet the length code, that won't be any wider? You're asking for a six inch height variance there, from looking at the picture, it looks like that sign is virtually as long as the Radiance sign and it's asking for a substantial width.

MR. WALSH: No, well, this is a banner that's on there, temporary banner that's actually a real, that's not even fabricated from the computer, this is actually a photograph of the banner that's currently up there.

MR. TORLEY: Radiance is a real banner and the Radiance banner is the same size as the sign that you want?

MR. WALSH: The one that's in front of the board would be this which would be channel letters, I cannot make channel letters of that size.

MR. TORLEY: Physically, it's the same size as that sign?

MR. WALSH: I believe so.

MR. TORLEY: Because then I'm a little confused unless it's just the way it was put on by the computer cause New Windsor Dental sign looks almost as long.

MR. WALSH: Well, the whole issue with this is with this kind of banner, you can shrink the Radiance, okay, which we did here and we shrunk down the logo up in here, you see how we did that differently, it's not possible to make channel letters with that size letter in this script that he has which is what he's trying to achieve from his other stores.

MR. TORLEY: So this sign meets the code?

MR. WALSH: That's a banner.

MR. TORLEY: That banner is physically the size of the code?

MR. WALSH: Right.

MR. TORLEY: That certainly looks legible to me, doesn't it?

MR. WALSH: He wanted to go with a more elaborate sign.

MR. KANE: I think just from my point of view when we go to the public hearing, might want to talk to him about some adjustments to the length on that, I don't have a problem with the height but I think I'd rather keep them more the same at ten foot.

MR. WALSH: If he loses the logo on the side here, that's a 3 x 3.

MR. KANE: That brings it to 12. I can live with that.

MR. WALSH: That's a little closer.

MR. TORLEY: Yes.

MR. KANE: Obviously, if you find a way to shrink it then keep the whole thing but I think we need some movement on the length.

MR. TORLEY: You're asking for a 50% average really.

MR. BABCOCK: No, he's allowed 10 and he wants 15, same difference.

MR. TORLEY: Any other questions on this matter?

MR. KANE: Tom, you understand how we feel about that?

MR. WALSH: Yes.

MR. MC DONALD: Accept a motion?

MR. TORLEY: Yes.

MR. MC DONALD: Make a motion we set up Windsor Dental Management for a public hearing on their request.

MR. KANE: Second it.

ROLL CALL

MR. KANE	AYE
MR. RIVERA	AYE
MR. MC DONALD	AYE
MR. TORLEY	AYE

**TOWN OF NEW WINDSOR  
ZONING BOARD OF APPEALS  
OFFICE  
845-563-4615**

**MEMORANDUM**

**TO: LARRY REIS, COMPTROLLER**  
**FROM: MYRA MASON, SECRETARY TO THE ZONING BOARD**  
**DATE: AUGUST 11, 2003**  
**SUBJECT: ESCROW REFUND - 03-26 - NW DENTAL**

**PLEASE ISSUE A CHECK IN THE AMOUNT OF \$ 407.50 TO CLOSE OUT  
ESCROW FOR:**

**ZBA FILE #03-26**

**NAME: NEW WINDSOR DENTAL MANAGEMENT CORP**

**ADDRESS: SUITE 300 - 375 WINDSOR HIGHWAY**

**NEW WINDSOR, NY 12553**

**THANK YOU,**

**MYRA**

**L.R. 8-11-03**



**TOWN OF NEW WINDSOR  
ZONING BOARD OF APPEALS  
RECORD OF CHARGES & PAYMENTS**



FILE #03-26      TYPE: AREA

APPLICANT:  
N.W. DENTAL

TELEPHONE:    565-6677

RESIDENTIAL:	\$ 50.00	CHECK #
COMMERCIAL	\$ 150.00	CHECK #3230
INTERPRETATION	\$ 150.00	CHECK #

ESCROW:            COMMERCIAL \$500.00            CHECK #3229

\*   \*   \*   \*   \*   \*   \*   \*   \*   \*   \*   \*   \*

<u>DISBURSEMENTS:</u>		<u>MINUTES</u> <u>\$4.50 / PAGE</u>	<u>ATTORNEY</u> <u>FEE</u>
PRELIMINARY:	<u>5</u> PAGES	\$ <u>22.50</u>	\$ <u>35.00</u>
2 <sup>ND</sup> PRELIMINARY:	<u>   </u> PAGES	\$ <u>   </u>	\$ <u>   </u>
PUBLIC HEARING:	<u>0</u> PAGES	\$ <u>-0-</u>	\$ <u>35.00</u>
PUBLIC HEARING:	<u>   </u> PAGES	\$ <u>   </u>	\$ <u>   </u>
TOTAL:		\$ <u>22.50</u>	\$ <u>70.00</u>

\*   \*   \*   \*   \*   \*   \*   \*   \*   \*   \*   \*   \*

ESCROW POSTED:            \$500.00  
LESS: DISBURSEMENTS:    \$ 92.50

AMOUNT DUE:            \$   

REFUND DUE:            \$ 407.50

L.R. 8-11-03



**ZONING BOARD OF APPEALS: TOWN OF NEW WINDSOR  
COUNTY OF ORANGE: STATE OF NEW YORK**

-----X

In the Matter of the Application for Variance of

NEW WINDSOR DENTAL MANAGEMENT CORP.

AFFIDAVIT OF  
SERVICE  
BY MAIL

#03-26

X

STATE OF NEW YORK )

) SS:

COUNTY OF ORANGE )

MYRA L. MASON, being duly sworn, deposes and says:

That I am not a party to the action, am over 18 years of age and reside at 67 Bethlehem Road, New Windsor, NY 12553.

That on the 17TH day of JUNE, 2003, I compared the 17 addressed envelopes containing the Public Hearing Notice pertinent to this case with the certified list provided by the Assessor's Office regarding the above application for a variance and I find that the addresses are identical to the list received. I then placed the envelopes in a U.S. Depository within the Town of New Windsor.

Sworn to before me this

Myra L. Mason

Myra L. Mason, Secretary

17<sup>th</sup> day of June, 2003

[Signature]  
Notary Public

JENNIFER MEAD  
Notary Public, State Of New York  
No. 01ME6050024  
Qualified In Orange County  
Commission Expires 10/30/2006

**PUBLIC HEARING NOTICE**  
**ZONING BOARD OF APPEALS**  
**TOWN OF NEW WINDSOR**

PLEASE TAKE NOTICE that the Zoning Board of Appeals of the TOWN OF NEW WINDSOR, New York, will hold a Public Hearing pursuant to Section 48-34A of the Zoning Local Law on the following Proposition:

**Appeal No. 03-26**

**Request of NEW WINDSOR DENTAL MANAGEMENT CORP.**

**for a VARIANCE of the Zoning Local Law to Permit:**

**Request for 6 inch height variance for each of seven (7) signs on façade of building and Request for 6 inch height and 5 feet width variance for sign at Radiance Tanning Studio all at 375 Windsor Highway, Suite 300**

**being a VARIANCE of Section 48-18, H-1b**

**for property located at: 375 WINDSOR HIGHWAY - NEW WINDSOR, NY**

**known and designated as tax map Section 65 Block 2 Lot 14**

**PUBLIC HEARING will take place on JULY 14, 2003**  
**at the New Windsor Town Hall, 555 Union Avenue, New Windsor, New York**  
**beginning at 7:30 P.M.**

  
Chairman



# Town of New Windsor

555 Union Avenue  
New Windsor, New York 12553  
Telephone: (914) 563-4631  
Fax: (914) 563-4693

## Assessors Office

June 11, 2003

New Windsor Dental Management Corp.  
375 Windsor Highway- Suite 300  
New Windsor, NY 12553

Re: 65-2-14 ZBA#03-26

Dear Sirs:

According to our records, the attached list of property owners are within five hundred (500) feet of the above referenced property.

The charge for this service is \$35.00, minus your deposit of \$25.00.

Please remit the balance of \$10.00 to the Town Clerk's Office.

Sincerely,

*J. Todd Wiley* *(baw)*

J. Todd Wiley, IAO  
Sole Assessor

JTW/baw  
Attachments

CC: Myra Mason, ZBA

49-1-8

Richard & Jeanine Crook  
64 Continental Drive  
New Windsor, NY 12553

49-1-9

John & Mary Rohan  
66 Continental Drive  
New Windsor, NY 12553

49-1-10

Edward & Linda Christian  
68 Continental Drive  
New Windsor, NY 12553

49-1-11

AnnMarie Marchiondo  
& Frank DeVaney  
70 Continental Drive  
New Windsor, NY 12553

49-1-12

Felix & Luz DeJesus  
72 Continental Drive  
New Windsor, NY 12553

49-1-20.1; 65-2-30

Tower Managm. Finan. Partnership LP  
680 Kinderkamack Road  
River Ridge, NJ 07661

49-1-21; 49-1-22

Wayne Baratta  
33 Village Common Rd  
Fishkill, NY 12524

49-1-23.1; 49-1-24

Carmine Andriuolo  
363 Windsor Highway  
New Windsor, NY 12553

49-1-23.2

County of Orange  
255-275 Main Street  
Goshen, NY 10924

49-1-25

Vittorio & Lucy Vitolo  
30 Heather Court  
Middletown, NY 10940

65-2-12.1

WVR Real Estate II LLC  
4 Coates Drive Suite 1  
Goshen, NY 10924

65-2-13

Frederick Kass  
New Windsor Mall  
367 Windsor Highway  
New Windsor, NY 12553

65-2-15

Blix Corporation  
P.O. Box 1002  
Highland Mills, NY 10930

65-2-16.1

Lizzie Realty LLC  
24 Dunning Road  
Middletown, NY 10940

65-2-25.11

Vails Gate 2002, LLC, Rite Aid Corp.  
Real Estate Tax Dept. Store #159  
P.O. Box 3165  
Harrisburg, PA 17105-3165

65-2-29

King Bouyea Sorbello  
C/o Robert K. Bouyea  
505 North Riverside Road  
Highland, NY 12528

Section 72

Kingswood Gardens Condo  
Bill Slack, Chairman of the Board of  
Directors, Unit 114  
810 Blooming Grove Tpke  
New Windsor, NY 12553

# **TOWN OF NEW WINDSOR** **REQUEST FOR NOTIFICATION LIST**

DATE: JUNE 10, 2003 PROJECT NUMBER: ZBA# 03-26 P.B. # \_\_\_\_\_

APPLICANT NAME: NEW WINDSOR DENTAL MANAGEMENT CORP.

PERSON TO NOTIFY TO PICK UP LIST:

NEW WINDSOR DENTAL MANAGEMENT CORP.  
375 WINDSOR HIGHWAY - SUITE 300  
NEW WINDSOR, NY 12553

TELEPHONE: 565-6677

TAX MAP NUMBER: SEC. 65 BLOCK 2 LOT 14  
SEC. \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_  
SEC. \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_

PROPERTY LOCATION: 375 WINDSOR HIGHWAY  
NEW WINDSOR, NY

THIS LIST IS BEING REQUESTED BY:

NEW WINDSOR PLANNING BOARD: \_\_\_\_\_

SITE PLAN OR SUBDIVISION: (ABUTTING AND ACROSS ANY STREET) \_\_\_\_\_

SPECIAL PERMIT ONLY: (ANYONE WITHIN 500 FEET) \_\_\_\_\_

AGRICULTURAL DISTRICT:  
(ANYONE WITHIN THE AG DISTRICT WHICH IS WITHIN 500'  
OF SITE PLAN OR SUBDIVISION PROJECT) \_\_\_\_\_

❖ ❖

NEW WINDSOR ZONING BOARD XX

LIST WILL CONSIST OF ALL PROPERTY WITHIN 500 FEET OF PROJECT XX

❖ ❖

AMOUNT OF DEPOSIT: 25.00 CHECK NUMBER: 3231

TOTAL CHARGES: \_\_\_\_\_



June 9, 2003

ZBA # 03-26  
P.B.#

**APPROVED:** M) \_\_\_\_\_ S) \_\_\_\_\_ VOTE: A \_\_\_\_\_ N \_\_\_\_\_  
 RIVERA \_\_\_\_\_  
 MCDONALD \_\_\_\_\_ CARRIED: Y \_\_\_\_\_ N \_\_\_\_\_  
 REIS \_\_\_\_\_  
 KANE \_\_\_\_\_  
 TORLEY \_\_\_\_\_

**SCHEDULE PUBLIC HEARING:**

RIVERA	<u>A</u>	M) <u>M</u> S) <u>K</u>	VOTE: A <u>4</u> N <u>   </u>
MCDONALD	<u>A</u>		
<del>REDACTED</del>	<u>   </u>		
KANE	<u>A</u>	CARRIED: Y <u>   </u> N <u>   </u>	
TORLEY	<u>A</u>		

**RIVERA** \_\_\_\_\_  
**MC DONALD** \_\_\_\_\_  
**REIS** \_\_\_\_\_  
**KANE** \_\_\_\_\_  
**TORLEY** \_\_\_\_\_

**CARRIED: Y N .**

[illegible]



# Town of New Windsor

555 Union Avenue  
New Windsor, New York 12553  
Telephone: (845) 563-4615  
Fax: (845) 563-4695

## ZONING BOARD OF APPEALS

June 17, 2003

New Windsor Dental Management Corp.  
375 Windsor Highway, Suite 300  
New Windsor, NY 12553

SUBJECT: REQUEST FOR VARIANCE #03-26

Dear Sirs:

This is just a reminder that your Public Hearing before the Zoning Board of Appeals for your requested variance at:

375 WINDSOR HIGHWAY  
NEW WINDSOR, NY

is scheduled for the JULY 14TH, 2003 agenda.

This meeting starts at 7:30 p.m. and is held in the Town Meeting Room at Town Hall. If you have any questions or concerns in this matter, please feel free to contact me.

Very truly yours,

Myra Mason, Secretary  
Zoning Board of Appeals

MLM:mlm

**TOWN OF NEW WINDSOR**  
**ZONING BOARD OF APPEALS**

**RECEIPT OF ESCROW RECEIVED:**

DATE RECEIVED: MAY 19, 2003

FOR: 03-26 ESCROW

FROM: NEW WINDSOR DENTAL MANAGEMENT CORP.

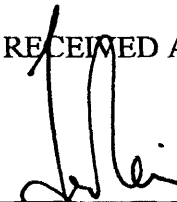
375 WINDSOR HIGHWAY , SUITE 300

NEW WINDSOR, NY 12553

CHECK NUMBER: 3229

AMOUNT: 500.00

RECEIVED AT COMPTROLLER'S OFFICE BY:

  
\_\_\_\_\_  
NAME

5/21/03  
\_\_\_\_\_  
DATE

PLEASE RETURN SIGNED COPY TO MYRA FOR FILING

THANK YOU



**Town of New Windsor**  
555 Union Avenue  
New Windsor, NY 12553  
(845) 563-4611

**RECEIPT**  
**#480-2003**

**05/21/2003**

New Windsor Dental Management Corp. <sup>#</sup>03-26

Received \$ 150.00 for Zoning Board Fees, on 05/21/2003. Thank you for  
stopping by the Town Clerk's office.

As always, it is our pleasure to serve you.

**Deborah Green**  
**Town Clerk**

NEW WINDSOR DENTAL MANAGEMENT CORP.  
SUITE 300  
375 WINDSOR HIGHWAY  
NEW WINDSOR, NEW YORK 12553

ORANGE COUNTY TRUST COMPANY  
MONTGOMERY, NY 12549  
50-247/219

3229

5/12/2003

PAY TO THE ORDER OF Town Of New Windsor

\$ \*\*500.00

Five Hundred and 00/100\*\*\*\*\* DOLLARS

Town Of New Windsor  
Receiver Of Taxes  
555 Union Avenue  
New Windsor, New York 12553  
Sign Variance

MEMO

⑈003229⑈ ⑆021902475⑆ 8094160⑈

NEW WINDSOR DENTAL MANAGEMENT CORP.  
SUITE 300  
375 WINDSOR HIGHWAY  
NEW WINDSOR, NEW YORK 12553

ORANGE COUNTY TRUST COMPANY  
MONTGOMERY, NY 12549  
50-247/219

3230

5/12/2003

PAY TO THE ORDER OF Town Of New Windsor

\$ \*\*150.00

One Hundred Fifty and 00/100\*\*\*\*\* DOLLARS

Town Of New Windsor  
Receiver Of Taxes  
555 Union Avenue  
New Windsor, New York 12553  
Sign Variance

MEMO

⑈003230⑈ ⑆021902475⑆ 8094160⑈

NEW WINDSOR DENTAL MANAGEMENT CORP.  
SUITE 300  
375 WINDSOR HIGHWAY  
NEW WINDSOR, NEW YORK 12553

ORANGE COUNTY TRUST COMPANY  
MONTGOMERY, NY 12549  
50-247/219

3231

5/12/2003

PAY TO THE ORDER OF Town Of New Windsor

\$ \*\*25.00

Twenty-Five and 00/100\*\*\*\*\* DOLLARS

Town Of New Windsor  
Receiver Of Taxes  
555 Union Avenue  
New Windsor, New York 12553  
Sign Variance

MEMO

⑈003231⑈ ⑆021902475⑆ 8094160⑈



# Town of New Windsor

555 Union Avenue  
New Windsor, New York 12553  
Telephone: (845) 563-4615  
Fax: (845) 563-4695

## ZONING BOARD OF APPEALS

May 19, 2003

New Windsor Dental Management Corp  
375 Windsor Highway, Suite 300  
New Windsor, NY 12553

SUBJECT: REQUEST FOR SIGN VARIANCE #03-26

Dear Dr. Stern:

This letter is to inform you that you have been placed on the June 9th, 2003 agenda for the Zoning Board of Appeals to discuss your request for a variance at:

New Windsor Dental Management Corp  
375 Windsor Highway, Suite 300  
New Windsor, NY 12553

This meeting starts at 7:30 p.m. and is held in the Town Meeting Room at Town Hall. If you have a problem with this time and/or date, please contact me at the above number and we will reschedule your appearance. If you have any further questions, please feel free to contact me.

Very truly yours,

---

Myra Mason, Secretary  
Zoning Board of Appeals

MLM:mlm



TOWN OF NEW WINDSOR  
ZONING BOARD OF APPEALS



APPLICATION FOR VARIANCE

MAY 4, 2003

Date

Application Type: Use Variance ☐ Area Variance ☐  
Sign Variance ☒ Interpretation ☐

I. Owner Information: Phone Number: (845) 565-6677  
NEW WINDSOR DENTAL Fax Number: (845) 565-6163  
(Name) MANAGEMENT CORP  
375 WINDSOR HIGHWAY - SUITE 300 - NEW WINDSOR  
(Address) NEW YORK 12553

II. Purchaser or Lessee: Phone Number: ( )  
Fax Number: ( )  
(Name)  
(Address)

III. Attorney: Phone Number: ( )  
Fax Number: ( )  
(Name)  
(Address)

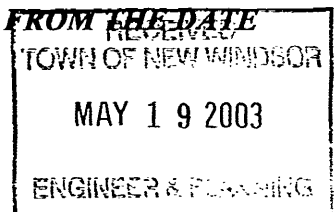
IV. Contractor/Engineer/Architect/Surveyor/: Phone Number (845) 896-2156  
Fax Number: (845) 896-2158  
SIGN LANGUAGE - TOM WALSH  
(Name)  
(Address)

V. Property Information:

Zone: C Property Address in Question:  
Lot Size: .9414 ACRES Tax Map Number: Section 65 Block 2 Lot 14  
a. What other zones lie within 500 feet?  
b. Is pending sale or lease subject to ZBA approval of this Application?  
c. When was property purchased by present owner? NOV. 19, 1999  
d. Has property been subdivided previously? NO If so, When:  
e. Has an Order to Remedy Violation been issued against the property by the  
Building/Zoning/Fire Inspector? NO  
f. Is there any outside storage at the property now or is any proposed? NO

\*\*\*\*PLEASE NOTE:\*\*\*\*\*

THIS APPLICATION, IF NOT FINALIZED, EXPIRES ONE YEAR FROM THE DATE  
OF SUBMITTAL.



**TOWN OF NEW WINDSOR  
ZONING BOARD OF APPEALS**

**APPLICATION FOR VARIANCE - continued**

**X. SIGN VARIANCE:**

- (a) Variance requested from New Windsor Zoning Local Law,  
Section \_\_\_\_\_, Supplementary Sign Regulations

	<u>Requirements</u>	<u>Proposed or Available</u>	<u>Variance Request</u>
Sign #1	30" x 10 FT	36" x 10 FT	6"
Sign #2	30" x 10 FT	"	"
Sign #3	30" x 10 FT	"	"
Sign #4	30" x 10 FT	"	"
Sign #5	30" x 10 FT	"	"
Sign #6	30" x 10 FT	"	"

60 WIRELESS  
SIGN IS  
3' x 5'

- (b) Describe in detail the sign(s) for which you seek a variance, and set forth your reasons for requiring extra or oversized signs.

THE NEW FACIA CONSTRUCTION CREATED A NEW LOOK FOR  
THE PROPERTY, ALLOWING THE 6" HEIGHT ON THE SIGNS  
CREATES A BALANCED LOOK FOR THE ENTIRE BUILDING.  
THE AREA VARIANCE REQUESTED IS NOT SUBSTANTIAL  
TO CREATE THIS BETTER APPEARANCE.

- (c) What is total area in square feet of all signs on premises including signs on windows, face of building and freestanding signs \_\_\_\_\_?

**XI. INTERPRETATION:**

- (a) Interpretation requested of New Windsor Zoning Local Law,  
Section \_\_\_\_\_
- (b) Describe in detail the proposal before the Board:

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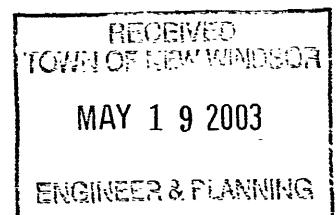
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**PLEASE NOTE:**

**THIS APPLICATION, IF NOT FINALIZED, EXPIRES ONE YEAR FROM THE DATE OF SUBMITTAL.**



**TOWN OF NEW WINDSOR  
ZONING BOARD OF APPEALS****APPLICATION FOR VARIANCE - continued**

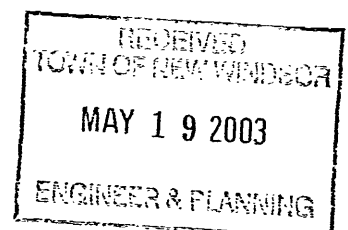
- IX. In making its determination, the ZBA shall take into consideration, among other aspects, the benefit to the applicant if the variance is granted as weighed against the detriment to the health, safety and welfare of the neighborhood or community by such grant. Also, whether an undesirable change will be produced in the character of the neighborhood or a detriment to nearby properties will be created by the granting of the area variance; (2) whether the benefit sought by the applicant can be achieved by some other method feasible for the applicant to pursue other than an area variance; (3) whether the requested area variance is substantial; (4) whether the proposed variance will have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district; and (5) whether the alleged difficulty was self-created.

After reading the above paragraph, please describe why you believe the ZBA should grant your application for an Area Variance:

① ALL THE SIGNS ON THE BUILDINGS FACIA  
WILL BE CONSISTANT IN SIZE. THESE SIGNS ARE ALSO SIMILAR  
IN SIZE TO SURROUNDING PLAZA SIGNS. ② THE AREA VARIANCE  
REQUESTED WILL CREATE A MORE BALANCED LOOK FOR THE NEW  
FACIA OF THE BUILDING. ③ IN THIS COMMERCIAL ZONE THERE  
ARE MANY SIGNS OF THIS NATURE & LARGER. ④ WE FEEL  
9 SQFT IS NOT SUBSTANTIAL ④ THERE ARE MANY SIGNS OF  
THE REQUESTED SIZE & LARGER IN THIS AREA ⑤ THE BUILDING  
HAS BEEN IN EXISTANCE FOR MANY YEARS, THE ALTERATIONS TO  
THE BUILDING ARE IN APPEARANCE ENHANCEMENTS.

**PLEASE NOTE:**

**THIS APPLICATION, IF NOT FINALIZED, EXPIRES ONE YEAR FROM THE DATE  
OF SUBMITTAL.**



**XII. ADDITIONAL COMMENTS:**

- (a) Describe any conditions or safeguards you offer to ensure that the quality of the zone and neighboring zones is maintained or upgraded and that the intent and spirit of the New Windsor Zoning Local Law is fostered. (Trees, landscaped, curbs, lighting, paving, fencing, screening, sign limitations, utilities, drainage.)
- 
- 
- 

**XIII. ATTACHMENTS REQUIRED:**

- ☐ Copy of contract of sale, lease or franchise agreement. Copy of deed and title policy.
- ☐ Copy of site plan or survey showing the size and location of the lot, the location of all buildings, facilities, utilities, access drives, parking areas, trees, landscaping, fencing, screening, signs, curbs, paving and streets within 200 ft. of the lot in question.
- ☐ Copies of signs with dimensions and location.
- ☐ Three checks: (each payable to the TOWN OF NEW WINDSOR)
- ☐ One in the amount of \$ 300.00 or 500.00 , (escrow)
- ☐ One in the amount of \$ 50.00 or 150.00 , (application fee)
- ☐ One in the amount of \$ 25.00 , (Public Hearing List Deposit)
- ☐ Photographs of existing premises from several angles.

**XIV. AFFIDAVIT.**

STATE OF NEW YORK)

) SS.:

COUNTY OF ORANGE )

The undersigned applicant, being duly sworn, deposes and states that the information, statements and representations contained in this application are true and accurate to the best of his/her knowledge or to the best of his/her information and belief. The applicant further understands and agrees that the Zoning Board of Appeals may take action to rescind any variance granted if the conditions or situation presented herein are materially changed.

Sworn to before me this:

12 day of May 2003.

Carol J. Goodwine  
Signature and Stamp of Notary

Carol J. Goodwine  
Notary Public, State of New York  
No. 01605075572  
Qualified in Sullivan County  
Commission Expires April 7, 2007

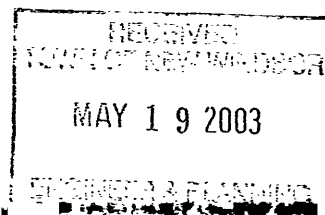
[Signature]  
Owner's Signature (Notarized)

NW Rental Management Corp  
Owner's Name (Please Print)

[Signature]  
Applicant's Signature (If not Owner)

**PLEASE NOTE:**

**THIS APPLICATION, IF NOT FINALIZED, EXPIRES ONE YEAR FROM THE DATE OF SUBMITTAL.**



# **APPLICANT/OWNER PROXY STATEMENT** (for professional representation)

for submittal to the:  
TOWN OF NEW WINDSOR ZONING BOARD OF APPEALS

NEW WINDSOR DENTAL MANAGEMENT CORP. THE BUILDING IS  
(OWNER) deposes and says that he resides

at 375 WINDSOR HIGHWAY - SUITE 300 in the County of ORANGE  
(OWNER'S ADDRESS)

and State of NEW YORK and that he is the owner of property tax map

designation number (Sec. 65 Block 2 Lot 14)  
(Sec. \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_) which is the premises described in

the foregoing application and that he authorizes:

(Applicant Name & Address, if different from owner)

THOMAS WALSH PRES  
SIGN LANGUAGE INC. 182 OLD RT. 9 FISHKILL, N.Y. 12524

(Name & Address of Professional Representative of Owner and/or Applicant)

to make the foregoing application as described therein.

Date: \_\_\_\_\_

\*\*

Owner's Signature (MUST BE NOTARIZED)

Sworn to before me this: 10 day of May 2003

For New Windsor Dental Management Corp.

Applicant's Signature (If different than owner)

Carol J. Goodwine  
Signature and Stamp of Notary

Carol J. Goodwine  
Notary Public, State of New York  
No. 01605075572  
Qualified in Sullivan County  
Commission Expires April 7, 2007

Thomas Walsh PRESIDENT SIGN LANGUAGE INC.  
Representative's Signature

**THIS FORM IS TO BE COMPLETED ONLY IF SOMEONE OTHER THAN THE PROPERTY OWNER WILL BE APPEARING AS REPRESENTATION OF THE OWNER AT THE ZBA MEETINGS.**

**\*\* PLEASE NOTE:**

**ONLY OWNER'S SIGNATURE MUST BE NOTARIZED.**

